

# High Cholesterol



## Cholesterol Lowering Tips:

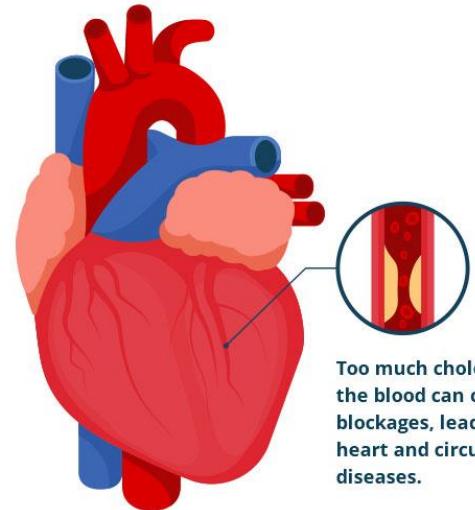
1. Reduce saturated fats in your diet
2. Trim excess fat off all meat
3. Choose lean cuts of meat
4. Eat a rainbow of colors daily
5. Avoid processed foods
6. Exercise for at least 30 minutes a day
7. Get your levels checked regularly
8. Quit smoking



Extra cholesterol can build up in your body. Having too much in your bloodstream can increase your risk of a heart attack or stroke



## Cholesterol



Too much cholesterol in the blood can create blockages, leading to heart and circulatory diseases.



# New Zealand Guidelines for Cholesterol measurements:

For most patients:

Total Cholesterol	Below 4.0mmol/L
LDL Cholesterol	Below 2.0mmol/L
HDL Cholesterol	Above 1mmol/L
Total Cholesterol	Below 4
Triglycerides	Below 1.7mmol/L

## Two sources of cholesterol:

### 1. Manufacture within the body:

- Liver (the main production site)
- Intestine
- Other organs

### 2. Diet

Cholesterol manufactured by the body adapts to the amount of cholesterol absorbed from your diet. So a high cholesterol diet will tend to lower the body's own cholesterol production. This is a complex balancing system that is not fully understood.

## How does the body remove cholesterol?

The body removes cholesterol by incorporation it into bile salts in the liver, these are often stored in the gallbladder as liquid bile, which is released into the intestine to help make other fats soluble so they can be digested. A large proportion of the cholesterol in bile salts will however be reabsorbed from the digestive tract.

## What is Cholesterol?

## Where does it come from?

Cholesterol is a white, waxy substance that is mostly manufactured by the body but can also be obtained from dietary sources. Cholesterol has a crucial role in the production of steroid hormones (eg; testosterone, oestrogen) and vitamin D, but its largest use is a vital building block of the body's cells.

## Essential Building Block -but too much can be harmful.

Cholesterol has gained itself a bad name in recent years because of the harmful effects of high blood levels of it can have on the heart and within the wider cardiovascular system; however, it is an essential building block and an essential part of your body's metabolism.

# Cholesterol

A risk factor for heart attack and stroke



Cholesterol is a type of fat that circulates in your blood and performs a number of important functions

≈75%

is produced by your liver

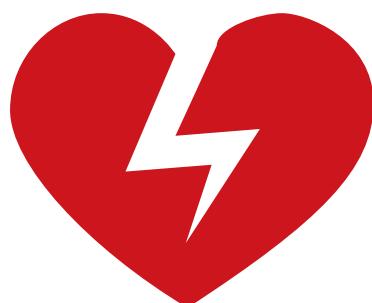


≈25%

comes from what you eat

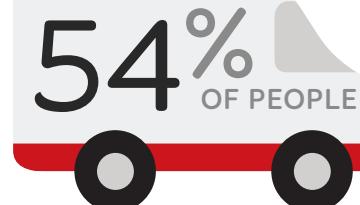
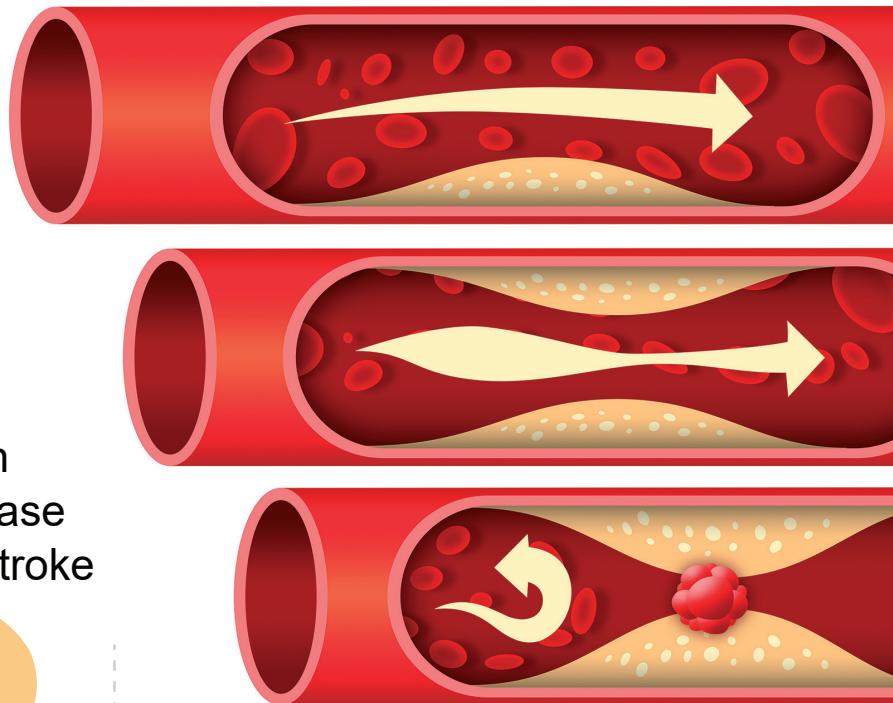
## HIGH Cholesterol

Extra cholesterol can build up in your body. Having too much in your bloodstream can increase your risk of a heart attack or stroke



Cholesterol can build up and narrow your arteries

A clot in a narrowed artery can cause a heart attack or stroke



admitted to hospital with a heart attack have high cholesterol

*Many people are unaware they have high cholesterol. The only way to find out is to have a blood test*

## CHOICES YOU CAN MAKE TO LOWER RISK OF HEART ATTACK & STROKE



Stop smoking



Make heart healthy eating and drinking choices



Move more



Lose weight



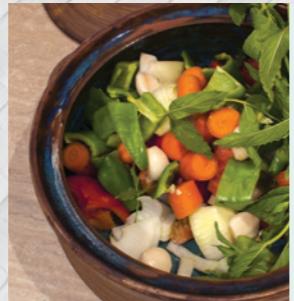
Take medications

# Healthy ways of cooking



## Baking

- It does not need added cream



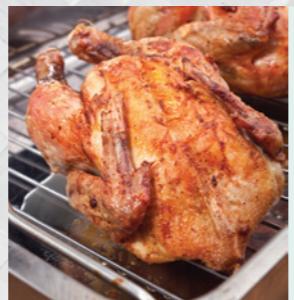
## Stewing

- Use lean meat
- Add more vegetables and/or beans to make it go further



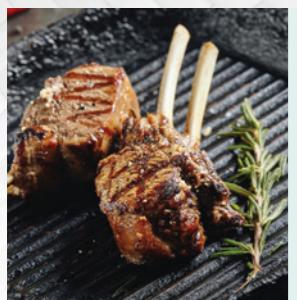
## Boiling or Steaming

- It does not need added cream



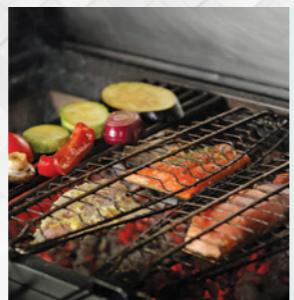
## Roasting

- Use a rack when roasting to drain the fat and throw this drained fat in the rubbish
- Remove skin and throw in the rubbish before serving the chicken



## Grilling

- Trim fat off meat and throw away the trimmed fat in the rubbish
- Use a baking rack to drain the extra fat and throw this extra fat in the rubbish



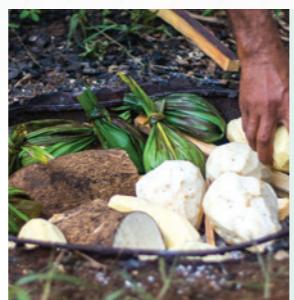
## BBQ

- Remove excess fat from meat before barbequing



## Stir Fry

- Use water, or if using oil, use a small amount



## 'Umu

- Use less coconut cream for palusami
- Remove excess fat from meat or canned meat for the lū

# Simple steps to good health

- 1 Eat foods from all **4 food groups**.
- 2 Eat foods **low in saturated fat, salt and sugar**.
- 3 Keep healthy by doing **at least 30 minutes of moderate physical activity 5 days or more per week**. Stay in shape by doing **some extra huff and puff and weight-bearing exercise**.
- 4 Avoid sitting for long periods of time.
- 5 Drink at least **8 glasses of liquid each day** – water is best.
- 6 If you drink alcohol limit your intake to:
  - **No more than 3 standard drinks\* per day for MEN**
  - **No more than 2 standard drinks\* per day for WOMEN**

\* A standard drink is a small glass of wine or one can or glass of beer or one nip (30ml) of spirit.

- 7 Buy, prepare, cook and store food carefully to ensure food safety.

**Pacific Heartbeat | Heart Foundation**  
9 Kalmia Street, Ellerslie, 1051  
PO Box 17-160, Greenlane, Auckland 1546  
P 09 571 9191 | F 09 571 9190  
[www.heartfoundation.org.nz](http://www.heartfoundation.org.nz)

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# Eat for Health



Supported by the Ministry of Health

# 6 Grain Foods Mostly whole grains

Provide carbohydrates for energy; dietary fibre to assist digestion and regular bowel movements; vitamins and minerals for good health.



**Eat 6 servings each day**

#### **Serving Examples**

- 1 sandwich-slice of bread, preferably whole grain
- 1 small bun or bread roll, preferably whole grain
- 1 cup cooked rice/pasta, preferably whole grain
- $\frac{1}{2}$  cup cooked porridge
- 2 weet-bix
- $\frac{1}{2}$  cup of muesli
- **Try bread with minimal spread on it**
- **Try adding fruit to cereals instead of sugar**

# 5+ Vegetables and Fruit Mostly seasonal & colourful ones

Provide carbohydrates, fibre, vitamins and minerals. Vitamins are essential for normal growth and protection from some diseases. Minerals are important for all functions of the body.



**Eat at least 5 servings each day**

#### **Serving examples**

- $\frac{1}{2}$  cup of raw, cooked, frozen or canned colourful vegetables or fruit
- 1 medium fruit, eg. apple, orange or mango
- 2 small fruits, eg. plums, apricots, kiwifruit
- 1 cup cooked potato, kumara, taro, yam or cassava
- 1 medium banana - yellow or green
- **Choose fruit canned in natural juice or drain the syrup**

# 2 Milk and Milk Products Mostly low or reduced fat

Provide calcium for strong bones and teeth, and protein for growth and repair.



**Eat 2 servings each day**

#### **Serving examples**

- 1 glass of milk (250ml)
- 1 carton of yoghurt (150ml)
- 2 thin slices cheese (40g)
- Choose reduced fat milk, cheese and yoghurt
- **Milk powder or evaporated milk is also a good choice**

# 1-2 Dried Beans, Lentils, Nuts, Seeds, Fish, Seafood, Eggs, Chicken and Lean Red Meat

Provide protein, vitamins and minerals. The body is easily able to absorb the iron in lean red meats, chicken and seafood.



**Eat 2 servings each day**

- $\frac{3}{4}$  cup cooked dried beans, eg. baked beans, kidney beans, chickpeas or lentils
- $\frac{1}{3}$  cup or small handful of unsalted, raw or lightly roasted nuts or seeds

**OR**

**Eat 1 serving each day**

- 1 medium fillet of fish - cooked (100g)
- 1 egg
- 1 chicken leg or 2 drumsticks (no skin)
- 1 small chicken breast (100g - no skin)
- 1 medium steak or large chop (fat removed)
- 2-3 slices cooked meat (approx. 100g)
- $\frac{3}{4}$  cup of stew, mince or casserole (195g)

# Food portions

Using your own hand can be an easy way to check the size of your portions. When serving up for someone else, use the size of their hand.

## Components of a meal



### Vegetables (non-starchy)

Your two hands cupped together is a good guide for the amount of non-starchy vegetables like carrots, broccoli or cauliflower, you should include at your meal. Include more, if you can.

**Tip** – choose vegetables from all the colours of the rainbow. Each colour provides a different range of nutrients.



### Grain foods and starchy vegetables or legumes

A portion of grain foods and starchy vegetables is the size of your closed fist. This group includes foods like potato, taro, corn, rice, green banana or a bread roll. A portion of legumes is also the size of your closed fist. Legumes include chickpeas, lentils and beans.

**Tip** – if you want more than one grain food or starchy vegetable in your meal, reduce the size of each one so the total portion is the size of your fist.



### Fish

The whole of your hand is a good portion guide for a piece of fish.

**Tip** – your whole hand is about the size of one fish fillet, which is enough for a meal.



### Poultry or meat

The palm of your hand is a guide for a portion of red meat, chicken or pork.

**Tip** – the thickness of the meat should be about the same thickness as the palm of your hand.

## Snacks



### Vegetables (non-starchy), fruit or nuts

A single portion of vegetables, fruit or nuts is what fits into the palm of your hand.

**Tip** – this is a good size for your snacks.



# eat most vegetables & fruit

## eat some

grain foods &  
starchy vegetables

legumes, fish, seafood,  
eggs, poultry & meat

milk, yoghurt  
& cheese

healthy oils,  
nuts & seeds

**CUT BACK ON** junk foods, takeaways & foods or drinks high in sugar, salt or saturated & trans fats



# eat most

## vegetables & fruit

### eat some

grain foods & starchy vegetables

legumes, fish, seafood, eggs, poultry & meat

milk, yoghurt & cheese

healthy oils, nuts & seeds

**CUT BACK ON** junk foods, takeaways & foods or drinks high in sugar, salt or saturated & trans fats

# simple steps

Healthier eating can be easy. Why not start by taking one simple step?

Here are some ideas to add goodness to your kai:

## vegetables & fruit : a variety of colours



'Add one' more vege to dinner



'Add one' salad vege to your sandwich



'Add one' coleslaw to a takeaway meal



'Add one' piece of fruit to breakfast or lunch

my step

## grain foods & starchy vegetables : wholegrain & high-fibre



Swap from white bread to wholegrain



Choose baked potatoes or kumara instead of deep fried



Use wholemeal instead of white flour



Choose just one starchy or grainy food at a meal

my step

## legumes, fish, seafood, eggs, poultry & meat : lean & skinless



Cut the fat off meat and skin off chicken



Drain the fat from canned corned beef



Add a can of legumes to a dish and use less meat



Steam, grill or pan fry fish instead of deep frying

my step

## milk, yoghurt & cheese : reduced fat



Switch to lite blue, green or yellow top milk



Swap from full fat to reduced fat cheese



Swap from a sweet bakery item to plain yoghurt



Try homemade instead of bought takeaways



Downsize from a big plate to a smaller size

## healthy oils, nuts & seeds



Swap from butter or ghee to oils or margarine



Choose a handful of nuts for a snack instead of potato chips



Add avocado to a sandwich or salad



Swap a can of fizzy to water or milk



Swap from two scoops of ice cream to one scoop

# What your **lipid test** means for **you**

## Your results

This info sheet is designed to help you understand the results of **your blood lipid test** and to describe some things **you can do** to improve your lipid results and **benefit your health**.

All men aged over 45 years and all women aged over 55 years should have their lipids checked at least once every 10 years. People of Māori, Pacific or Indo-Asian ethnicity should start having their lipids checked 10 years earlier than this. Some people will have their lipids checked more frequently because, for example, they are on lipid lowering medicine, have diabetes or have other reasons that mean they will benefit from more regular checking.

The results of the lipid test we will focus on here are **total cholesterol**, **LDL cholesterol**, **HDL cholesterol**, and **triglycerides**.

	Your result	Your target level
Total cholesterol	<input type="text"/>	<input type="text"/>
LDL cholesterol	<input type="text"/>	<input type="text"/>
HDL cholesterol	<input type="text"/>	<input type="text"/>
Triglycerides	<input type="text"/>	<input type="text"/>
HDL/cholesterol ratio	<input type="text"/>	<input type="text"/>

Ask your GP to write your results in the above table, also include your target levels. This also provides a good opportunity for you to discuss your lipid results.

## What do your results mean?

**Total Cholesterol.** Cholesterol is a waxy, fat-like substance made in the liver from the fats and oils we eat. It is important for the production of hormones and bile, and is incorporated into the cell wall of all cells. The body requires only a small amount of cholesterol to meet these needs, and when too much is present health problems such as heart disease may develop.

Cholesterol travels through the blood attached to special proteins called lipoproteins. Lipo-proteins are classified as high density, low density or very low density.

**LDL Cholesterol** (low density lipoprotein) is often called "bad cholesterol". When too much LDL cholesterol circulates in the blood, it can slowly build up in the inner walls of the arteries that lead to the heart and brain. This can eventually form a thick, hard deposit called a 'plaque'. This increases the chance of a clot forming in the artery, which may then cause a heart attack or stroke.

For most people who need to improve their lipid levels, LDL cholesterol is the main result to focus on, and it is usually best to get it as low as possible.

**HDL Cholesterol** (high density lipoprotein) is often known as "good" cholesterol, because high levels of HDL help to protect against heart attack. Medical experts think that HDL carries cholesterol away from the arteries and back to the liver, where it can be removed from the body. It is also thought that HDL removes excess cholesterol from any developing plaque in the arteries and slows its build-up.

Higher levels of HDL are therefore better. However, it is usually easier to lower your LDL levels than it is to increase your HDL levels.

A good way to remember the difference between LDL and HDL is that **LDL** is better to be **Lower** and **HDL** is better to be **Higher**.

**Triglycerides** are the main sort of fat we eat. They are an important source of energy but excess triglycerides can increase the likelihood of heart attack, stroke or obesity.

**Cholesterol/HDL ratio** is used to help calculate a person's risk of a heart attack or stroke. Once the risk has been determined, it is the LDL-cholesterol, HDL-cholesterol and triglyceride levels, which are more important.

Cholesterol and triglyceride levels are strongly influenced by the foods we eat, in particular fats and oils.

# Dietary fats affect your lipid results



REDUCE

**All fats and oils** in our diet are high in calories and eating too much of them contributes to becoming overweight or obese. Fats and oils increase triglyceride levels and decrease levels of HDL-cholesterol. Most of us need to reduce the amount of oils and fats we eat.



AVOID

**Trans fats** are man-made fats and are the worst type of fat to eat and should be avoided. They increase LDL cholesterol levels and decrease HDL cholesterol levels: exactly the opposite of what we want to happen.



AVOID

**Saturated fats** are also a bad form of fat to eat. They cause obesity and raise the LDL cholesterol level. Most of us need to considerably reduce the level of saturated fats in our diet.



CHOOSE

**Monounsaturated fats**, if eaten in moderation, are one of the best sources of fat, especially if they are used to replace saturated fats. Monounsaturated fats can help lower LDL cholesterol.



CHOOSE

**Polyunsaturated fats** can be divided into:

- **Omega 6** helps to lower LDL cholesterol when consumed in moderation. When omega-6 fats are consumed in very large amounts, they can sometimes decrease HDL cholesterol.
- **Omega 3** can reduce triglycerides but have a variable effect on LDL cholesterol.



CHOOSE

**Sterols** block absorption of cholesterol into the bloodstream from the intestine and can be useful in lowering LDL cholesterol levels.

## Making healthy choices

If you want to make healthy choices about the fats you eat, there are a number of practical things that can be easily incorporated into your diet. To reduce the amount of fat you eat:

- Add as little fat as possible when preparing meals
- Remove visible fat from meat prior to cooking
- Replace full fat milk ('blue milk') with lower fat milks – 'light blue' or 'green' top
- Replace butter with monounsaturated or polyunsaturated margarines and choose margarines with the Heart Foundation tick – they have less than 1% trans fats
- Avoid foods that contain 'hydrogenated vegetable oil' or 'partially hydrogenated vegetable oil' – these are alternative names for trans fats.
- Be aware: fat is often 'hidden' in pies, pastries, cakes and biscuits

Regular exercise is also important in helping to reduce cholesterol levels.

## Read the nutritional information on products

Food sold in New Zealand must be labelled in accordance with the Food Standards Code. For most foods, this means a nutrition information panel must be included. The manufacturers are required to state the total fat and saturated fat, but many manufacturers will also include amount of polyunsaturated, monounsaturated and trans fats. It is worthwhile becoming familiar with these panels, as they can help you make healthy food choices. By examining the panels on similar foods, you can choose the item with the lower levels and better type of fats.

Nutrition Fact	Amount/Serving	Amount/Serving	Amount/Serving
Serving Size 1 Bar (50g)	Total Fat 7.9g	Sodium 50 mg	Added Sugars 0.4g
Kilojoules 863 (2007 Calories)	Sat. Fat 1.3g	Total Carb. 30.1g	Protein 4.2g
	Polyunsat. Fat 3.3g	Total Sugars 24.9g	Omega-6 3.2g
	Monounsat. Fat 2.5g	Fruit Sugars 24.5g	

Ingredients: Pineapple, Papaya, Eggs, Hazel Nuts, Wheat Flour, Ginger, Sunflower Seeds, Apricot, Nectarine, Sultanas, Dates, Almonds, Walnuts, Brown Sugar, Baking Soda.

Type of Fat	Dietary Sources	Effect on LDL-cholesterol	Effect on HDL-cholesterol	Effect on Triglycerides
<b>Trans Fats</b>	Commercially fried foods, snacks and baked goods			No effect
<b>Saturated Fat</b>	Red meat, cheese, butter, fried foods and baked goods, palm oil and some other vegetable oils		No effect	No effect
<b>Monounsaturated Fats</b>	Nuts, olives, avocados, olive and canola oils		No effect	No effect
Polyunsaturated Fat: <b>Omega-6</b>	Corn, soybean and safflower margarine & oils			?
Polyunsaturated Fat: <b>Omega-3</b>	Salmon, mackerel, herring, flaxseed, walnuts, walnut oil, soybean and soybean oil		No effect	
<b>Sterols</b>	Margarines with added plant sterols		No effect	No effect

# Lowering your risk of heart attack and stroke



# Welcome

## to this Heart Foundation booklet

You have an important role to play in your heart health, and you can make choices today to lower your chance of having a heart attack or stroke in the future. Whether it is you or a loved one who is looking to find out more about risk, you are likely to have many questions. We hope the information in this booklet will give you some of the answers, but remember you can talk to your doctor or nurse about any questions or concerns you have as well.

### My checklist

After reading through this booklet, you should be able to check off the following statements.

- I understand what my personal risk of heart attack and stroke means.
- I understand how I can make choices to lower my risk of heart attack and stroke.
- I have talked to my family, my doctor, nurse or other health professionals about the choices I have and what I might like to do.
- I have checked out the Heart Foundation's website to find more information about how to lower my risk.
- I have made a plan to look after my heart health.

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# Heart attack and stroke

## What is a heart attack or stroke?

- **A heart attack happens when blood stops flowing to part of your heart.**
- **A stroke happens when blood stops flowing to part of your brain.**

A blood clot can block an artery feeding blood to your heart, causing a heart attack, or to your brain, causing a stroke. This clot is often the result of a build-up of plaque in your arteries (called coronary artery disease). When one of these plaques ruptures, it can cause a blood clot to form, and block an artery.

### Coronary artery disease

Plaque builds up in an artery.

### Angina

It is harder for blood to get through the artery.

Angina acts as a warning sign of narrowed arteries. You may not have angina before having a heart attack.

### Heart attack and stroke

Plaque cracks and a blood clot blocks an artery to the heart (heart attack) or to the brain (stroke).

## Heart and diabetes checks

A 'heart and diabetes check' is an appointment with your doctor or nurse. Together, you will estimate your risk of having a heart attack or stroke in the next five years, and discuss options and choices you have to protect your heart.

### What happens during a heart and diabetes check?

Together with your doctor or nurse, you are likely to:

- discuss any family history of heart attack or stroke
- measure your blood pressure, height and weight
- discuss your cholesterol and blood sugar levels
- talk about anything in your life that might be increasing the chance of you having a heart attack or stroke, or developing diabetes. These things are called risk factors.

Many of us don't know whether we're at risk of having a heart attack or stroke. A heart and diabetes check ensures we learn about our risk, and find out what steps we can take to protect our heart.

### Just because you are at 'low risk', doesn't mean you are at 'no risk'.

You may still have a heart attack or stroke even if you are at low risk. That's why it is so important to look at the choices you can make to improve your life-long heart health.

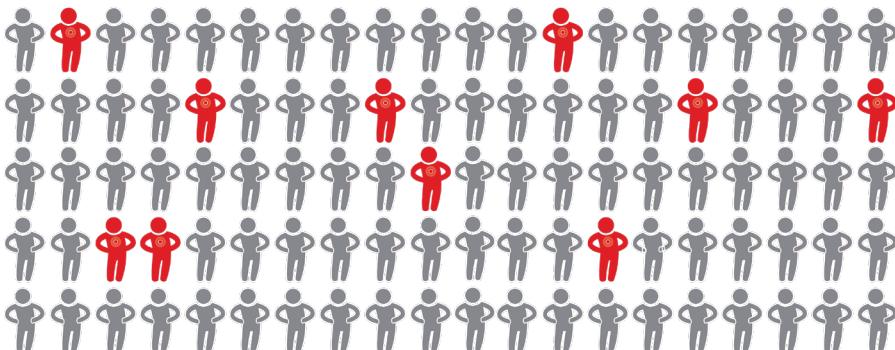


To learn the warning signs of a heart attack and what to do, take our heart attack warning signs quiz  
[heartfoundation.org.nz/quiz](http://heartfoundation.org.nz/quiz)

# Risk of heart attack and stroke

## What is risk and what does it mean for me?

Your risk is an estimate of how likely you are to have a heart attack or stroke in the next five years. If you have a 10% risk, it means that if there were 100 people like you, we'd expect 10 of them to have a heart attack or stroke in the next five years.



## Risk factors and overall risk

In the past, your doctor may have talked to you about each one of these risk factors separately. We now know it is better to focus on all your risk factors combined rather than just individual risk factors.

There are some risk factors you can change to help lower your risk, but there are others you can't change.

### Risk factors you can't change



Family history  
of heart disease



Personal history  
of heart disease



Gender



Ethnicity



Age

### Risk factors you can change



Smoking



High blood  
pressure



High  
cholesterol



Diabetes



Poor diet



Overweight



Not enough  
exercise

### What does your overall risk look like?

Your overall risk is worked out by looking at all of your risk factors added together. It's like building a tower out of building blocks. The risk factors are the blocks, but it's the tower they build that is important.



When deciding what you would like to do about your risk of heart attack and stroke, it is important to consider your personal beliefs and concerns, and those of your family. You may like to think about:

- what your risk means for you and your family/whānau
- what your risk will mean for you in a few years' time
- the pros and cons of any changes you make
- how any change you make might affect both you and your family/whānau
- who you would ask for support.



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#### **Questions you may like to ask your doctor or nurse**

- What's the best thing I could do to lower my risk?
- What support is available to help me stop smoking?
- I've tried to make lifestyle changes before and failed – what can I do differently this time to be successful?

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If you are thinking about taking natural, complementary or traditional therapies to manage your risk, please talk to your doctor, nurse or pharmacist.

# Choices you have to manage your risk

## Making choices to lower your risk

**You have an important role to play in your health.**

No matter how high or how low your risk of heart attack or stroke, there are always choices you can make to lower your risk.

The choices you make every day can change your risk of heart attack and stroke.

### Choices you can make to lower your risk of heart attack & stroke



Stop smoking



Make heart healthy eating and drinking choices



Move more



Lose weight



Take medications

**Even small changes have a positive effect on your risk factors and your overall risk of heart attack and stroke.**

Making one small change that you're able to stick to is more valuable than making a big change that's hard to stick to. As you get comfortable with one small change, you may like to add another one. Slowly you can start building sustainable, healthier habits.

**Note:** The choices you make to lower your risk of heart attack and stroke will also help you manage high blood pressure, high cholesterol or diabetes.

## Stop smoking

Becoming smokefree is the best thing you can do for your heart.



You are more likely to successfully stop smoking if you get help. Using stop smoking services and medications can double your chances of being smokefree in the long-term. Talk to your doctor or nurse or pharmacist about what support may work best for you.



Phone,  
online and  
text-to-quit



Local one-on-one  
or group support  
programme



Patches,  
lozenges  
and/or gum



Other  
medications

### What about e-cigarettes?

Current research suggests vaping (or using e-cigarettes) is a less harmful alternative than conventional cigarettes and can help you quit.

#### Tips:

- It's much easier to stop smoking when you have support from family/whānau – who can you ask to help you?
- Nicotine cravings last for three minutes, so you only need to hold out for 180 seconds to beat the urge to smoke.

#### My next step is:

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Phone Quitline on **0800 778 778** or visit **quit.org.nz** for more information about support to stop smoking

## Make heart healthy eating and drinking choices

Heart healthy eating is all about balancing the different types of food you eat to get a range of nutrients. Try balancing your day's eating like this:

**eat  
most  
vegetables  
& fruit**

**eat some  
grain foods &  
starchy vegetables**

legumes, fish, seafood,  
eggs, poultry & meat

milk, yoghurt  
& cheese

healthy oils,  
nuts & seeds

**CUT BACK ON** junk foods, takeaways & foods or drinks high in sugar, salt or saturated & trans fats

Follow these simple steps to help you make realistic changes to what you eat and to improve your heart health.

- 1** Share and enjoy meals with family and friends that focus mostly on whole and less-processed foods.
- 2** Include plenty of colourful non-starchy vegetables\* and/or fruit at every meal and for most snacks.
- 3** Choose whole grains in place of refined grain products e.g. choose brown rice instead of white rice.
- 4** Use legumes like chickpeas, kidney beans, black beans and lentils in place of meat or mix into a dish and use less meat.
- 5** Include fresh or canned oily fish like mackerel, sardines and salmon a couple of times a week.
- 6** Use mostly reduced or low-fat milk, cheese and yoghurt (or calcium-rich alternatives) everyday.
- 7** Choose healthy oils, nuts and seeds instead of animal and coconut fats.
- 8** Drink water to quench thirst, and limit sugary drinks and alcohol.
- 9** When preparing meals, snacks and drinks, use pepper, herbs, spices or fruit to add flavour rather than using salt or sugar.

\*Does not include starchy vegetables like potatoes, Māori potatoes, kūmara, corn, parsnip, yams, cassava/tapioca, green banana and taro.



**Goal:** To follow a heart healthy eating and drinking pattern throughout the week.

## Lose weight

There are steps you can start taking today to manage your weight. It's all about balancing what you eat and drink with the exercise that you do.



Use a small plate rather than a big one



Swap a can of fizzy to water



Keep a food diary to help you keep on track



Cut down on alcohol



Try walking or biking to work rather than driving



For more ideas, check out the 'heart healthy eating' and 'moving more' pages

### Tips:

- If you're feeling hungry, have a glass of water first. Often we can mistake the feeling of thirst for hunger.
- Listen to your stomach, not your eyes, for when it's time to stop eating.

### My next step is:



**Goal:** If overweight, aim to lose 5 - 10% of your body weight.

## Move more

Getting active can be simple. Why not try one of these ideas each day?



Take the stairs instead of the elevator



Get off the bus one stop early and walk



Talk to your doctor or nurse about a green prescription



Deliver a message in person to a co-worker instead of sending an email



Catch up with friends during a walk instead of by phone



Get in the pool and try walking in water

### Tip:

When doing moderate exercise, you should feel your heart pumping harder but still be able to talk comfortably.

- If you are too breathless to talk, then it's time to slow down.
- If you are able to sing or whistle, then step up the pace.

### My next step is:



**Goal:** Work up to doing 2.5 hours of moderate exercise over a week.

## Take medications

Even if you start making some lifestyle changes, your doctor may still like to talk to you about medications.



### To keep safe when taking medication, you need to understand:

- what the medication does
- why you are on the medication
- which unwanted effects you should look out for.



### Feeling uncomfortable?

If you have questions or concerns about your medications or if you have any unwanted side effects, please talk to your doctor, nurse or pharmacist. There may be other medications available that would suit you better.

#### Tips:

When taking medication, it's important to take it regularly. You may like to:



Set reminders on your cellphone.



Talk to your pharmacist about a blister pack.

### My next step is:



**Goal:** To understand any medication you are on and why you are taking it.

## Watch and wait

Risk means something different to everyone.



You may decide you'd like to simply monitor your health for a while. Then, if your health or life changes in any way, you might decide at a later date to start taking steps to lower your risk of heart attack and stroke.

If you decide to take a 'watch and wait' approach, you won't have to make any lifestyle changes or remember to take any medication. You also won't have any side effects or complications. However, you will need to monitor your health, which may mean extra visits to the doctor.

Making a lifestyle change can help improve your overall health and wellbeing, and lower your risk of other illnesses. If you decide to watch and wait, you will miss out on these benefits.

Over time, it is likely that without treatment or making lifestyle changes, your risk of heart attack or stroke will increase. Please think about what this may mean for you and your family/whānau.

### Tips:

- Schedule a regular check-up with your doctor or nurse to monitor your health.
- Learn the warning signs and symptoms of a heart attack and stroke so you can react quickly.

### My next step is:



For more about making choices to manage your risk, visit [heartfoundation.org.nz](http://heartfoundation.org.nz).

# Making a plan for heart health

## You have an important role to play in your health

After reading through this section, there may be one or more things you'd like to do to lower your chance of having a heart attack or stroke. Have a conversation with your doctor or nurse about any changes you're thinking about.

There will be many things going on in your day-to-day life which:

- will affect your health
- may make it hard to make lifestyle changes
- may be more important or worrying for you at the moment than your risk of having a heart attack or stroke.

Circle areas of the 'wheel' below to help you identify where to focus your energy and set a goal for change.



## What area of the wheel do you want to tackle first?

**How important** is it to you to make a change in this area?



Not important ← → Very important

If making a change is less important to you than a 7, try finding a more important change that you would like to make.

Try setting a SMART goal. This means what you want to do should be:

- S**pecific
- M**easurable
- A**chievable
- R**ealistic, and have a
- T**ime-frame

**My SMART goal is:**

## What small steps will you take to achieve this goal?

These will be your targets. Make them detailed, and make them SMART.

## How sure are you that you can do this?



If it is less than 7, think about what it would take to increase your confidence, or think about starting with a smaller step.

## Who could help you to achieve your goal?

For example, your family/whānau may want to make changes with you.

## What other support would help you achieve your goal?

For example, community support groups, dietitian.

## What might get in the way of you achieving your goal?

How will you overcome these problems?

Keep track of how much effort it takes you to achieve your target(s) by marking down a score (see scale to the right) every day this week.

## My plan for week 1

Goal	Target

## My plan for week 2

Goal	Target

## Check your progress

After your first week, look at your plan and see how much effort it took to achieve your targets.

Ideally, you should be aiming for about a 5 for effort, so if you're finding your targets too hard, spend more time working to achieve them. If you're finding them too easy, increase your target by doing it for longer, doing it more often, or adding a new goal or target.



	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7

	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7

Remember to reward yourself if you have achieved your targets, and keep going.

Use a notebook, and keep monitoring your progress for the next few weeks until you reach your goal.



# Action plans

## Stroke warning signs

**AT ANY SIGN OF STROKE  
CALL 111 F A S T**



FACE DROOPING ON ONE SIDE  
ARM WEAKNESS ON ONE SIDE  
SPEECH MIXED UP, SLURRED OR LOST  
TAKE ACTION -CALL 111 IMMEDIATELY

stroke.org.nz

If you see any of these signs, call 111 immediately.  
Getting help fast means a better chance of recovery.

Reproduced with permission from the Stroke Foundation of New Zealand  
and the Health Promotion Agency

### ANGINA ACTION PLAN

1      5 MIN      2      5 MIN      3

- If you are having angina symptoms, stop what you are doing and rest now
- Tell someone how you are feeling
- Take 1 puff of your GTN spray or 1 tablet under your tongue

- After 5 minutes if your symptoms have not been relieved, take 1 more puff of your GTN spray or 1 more tablet under your tongue

- After another 5 minutes if you still have symptoms, treat as a heart attack - **dial 111 and ask for an ambulance**
- Chew an aspirin if advised by a paramedic

If your symptoms go away, you can resume your activities gently.

If your angina becomes more frequent, severe, lasts longer or happens when you are doing very little or resting, see your doctor in the next 24 hours.

# Heart attack warning signs



## ARE YOU EXPERIENCING...

HEAVINESS



TIGHTNESS

PRESSURE



DISCOMFORT  
/PAIN

In ANY of  
these areas:

- ◆ CHEST
- ◆ SHOULDER
- ◆ JAW
- ◆ ARM
- ◆ NECK
- ◆ BACK (PAIN  
IN MID BACK)



You may also  
experience:

- SWEATING ◆
- SHORTNESS ◆  
OF BREATH
- NAUSEA ◆
- FATIGUE ◆
- DIZZINESS ◆

YES?



**Stop and rest now.**  
Tell someone how you  
feel.



**If symptoms continue for  
more than 10 minutes, call  
111 and ask for an ambulance.**  
Chew an aspirin if advised by  
a paramedic.



If you have **angina medication**, take one puff of your GTN spray. Wait five minutes. If symptoms continue, take another puff. Wait five minutes. If you still have symptoms, treat as a heart attack. Dial 111 and ask for an ambulance.

## Hearts fit for life

The Heart Foundation is the charity that works to stop all people in New Zealand dying prematurely from heart disease and enable people with heart disease to live full lives.

Visit our website [heartfoundation.org.nz](http://heartfoundation.org.nz) to find out how to:

- join information and support sessions
- share your story
- ask questions.

**If you would like to assist us to help other people like yourself, please consider donating**

### To donate:

Visit: [heartfoundation.org.nz/donate](http://heartfoundation.org.nz/donate)

Phone: 0800 830 100

Heart Foundation, PO Box 17160, Greenlane, Auckland 1546  
T 0800 863 375 F 09 571 9190 E [info@heartfoundation.org.nz](mailto:info@heartfoundation.org.nz)

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