

fabulous talk about the history of the BAD group and the funding projects it has achieved.

THANK YOU!

Many thanks to **Mike & Maureen Ebdon** for all their help and dedication since 2005. Mike and Maureen win the prize for their longstanding contributions to the group. Their ideas led to the development of the group and they have been at the forefront of organising social events such as skittles, walks, quizzes and coffee mornings. They have put themselves forward for many committee roles including treasurer and printing newsletters. For many years they even folded and sent out all the invites and newsletters to everyone on the mailing list. Their sense of humour has been welcomed at the BAD meetings and their hard work managing the meetings has been much appreciated especially by the Arrhythmia Nurses and fellow committee members. Thank you both for all your help and support. You will be sadly missed by the Committee, Arrhythmia Nurses and BAD group members.

A LITTLE INFORMATION ABOUT CARDIOMIOPATHY

Cardiomyopathy is a general term for disease of the heart muscle which affects its size, shape and structure and makes it harder for the heart to pump blood to the rest of the body.

Causes

There are different types of cardiomyopathy, some are inherited and pass through families, whilst some can be caused by viral infections, long term high blood pressure, obesity, damage from heart attack, alcohol, autoimmune diseases and medications such as chemotherapy used in cancer patients. Sometimes the cause of the cardiomyopathy is unknown.

Symptoms

Although there may not be any symptoms in early stages, progressively this can develop to heart failure symptoms. These symptoms include shortness of breath, swelling in ankles, legs, feet or abdomen, tiredness, chest discomfort/pressure, dizziness/light headedness & fainting.

Diagnosis

Certain tests will be undertaken to make a diagnosis, these will include an ECG and echocardiogram or MRI (*magnetic resonance imaging*) scan to look at the structure of the heart.

Treatment

You cannot cure most cardiomyopathy but treatments aim to manage symptoms and address lifestyle. Very rarely cardiomyopathy can be caused by severe stress from which people can recover.

Lifestyle changes

It is advised to lose weight, avoid alcohol, manage stress, stop smoking and eat a healthy diet and undertake regular exercise. If the cardiomyopathy is genetic/hereditary exercise restrictions may be advised – this will need discussion with the doctor.

Medications

Medications may be introduced to improve the pump function of the heart by reducing heart rate and blood pressure, or reduce fluid build-up.

Surgical Procedures

Devices such as pacemakers, left ventricular assist devices (LVADs) & Implantable Cardioverter Defibrillators can help to improve symptoms, improve heart function and reduce risks associated with abnormal heart rhythms that may be caused by cardiomyopathy. Open heart surgery or heart transplant may be a last resort.

Non-surgical procedures

Alcohol septal ablation is used to destroy a portion of thickened heart muscle allowing blood to flow more easily through that area which can improve symptoms.

*More information about
Cardiomyopathy can be
found on the
British Heart Foundation
& Cardiomyopathy UK
websites.*

*& Cardiomyopathy UK
websites.*

Introducing ICD Life!

On line social forum

Connect, Communicate
and Share Information

We are in the process of developing an online social networking forum for people with ICDs. This is your opportunity to share experiences and connect with others who may have been through a similar situation. It is an extension of the support offered by the Arrhythmia Nurses and an opportunity to share information that may be of interest to others who are or have been "walking in your shoes". The group is for all ages and experiences regardless of your background or medical condition. It is a closed private group and can only be joined by invitation only. If you would be interested in joining please contact the Arrhythmia Nurses on 01202 726154 or

arrhythmia.nurses@rbch.nhs.uk

DO YOU HAVE ANY IDEAS?

Do you have a tale to tell or any suggestion for topics that you would like to see covered in future issues of the newsletter? Please let us know by contacting the Arrhythmia Nurse specialists as given below.

Ali,
the Arrhythmia Nurse Team
and the
BAD Group Committee.

HOPE TO SEE YOU ALL
AT THE NEXT MEETING!

CONTACT DETAILS

arrhythmia.nurses@rbch.nhs.co.uk

01202 726154

Post Point B47,
Royal Bournemouth
Hospital,
Castle Lane East,
Bournemouth,
BH7 7DW.



BAD MEETING DATE

Monday 11th November,

Time: 1pm

at

Hamworthy Club

SKITTLES EVENING

Friday 22nd November,

Time: 6.30 pm

at

Hamworthy Club

ARRHYTHMIA TEAM CHANGES

The Arrhythmia Nurse Team has again seen some changes. Our lovely **Kirsty** has left to become an arrhythmia nurse at Salisbury

Hospital. We miss her terribly but wish her well in her new post. In addition we have **Nicole** who has been doing a great job with us for a 6 month secondment from the coronary care unit, and has now been made a permanent member of the team. **Beth** has joined the Advanced Nurse Practitioner team for a 6 month secondment, and hopefully will rejoin us again in January.

Sharon (*Morris – we have 2 Sharon's!*) and I are looking forward to becoming involved in the BAD Group for the next year, although there will still be input from other members of the team from time to time.

Ali Parish

LAST MEETING SUMMARY

Thank you to those who attended the last meeting at Hamworthy Club. The meeting was well attended with a mixture of old and new faces. Congratulations to **Gaynor & Sarah** who were recognised for their longstanding dedication and commitment to the BAD group having established the group and built it up to the amazing group it is today. Gaynor presented a