



CONGESTIVE HEART FAILURE

ABOUT THE DISEASE

In healthy animals, a normal heart pumps blood throughout the entire body. Heart failure is present when the pumping action of the heart is no longer effective, and blood is not being pumped through the body normally. In patients with **congestive heart failure (CHF)** due to heart disease, fluid can back up into the lungs (pulmonary edema), chest (pleural effusion), or abdomen (ascites). Once fluid accumulation, and therefore CHF, occurs, the following symptoms may be noted: fast or labored breathing, coughing in dogs, abdominal distension, exercise intolerance, and/or weakness.

Heart diseases that are more common include heart valve disease, weakening or thickening of the heart muscle, heartworm disease, and fluid surrounding the heart (pericardial disease).

OBTAINING A DIAGNOSIS

An annual veterinary examination will help identify physical abnormalities, such as a heart murmur, an abnormal/irregular heart rhythm (arrhythmia), breathing changes, increased or abnormal lung sounds (crackles, wheezes), and/or abdominal distension. A heart murmur is the most common physical exam abnormality and is almost always present in dogs with heart disease. Unfortunately, at least one-third of cats with heart disease do not have an audible murmur, which can make heart disease more difficult to identify.

An ultrasound of the heart (called echocardiogram) is the preferred choice for diagnosing heart disease.

X-rays (radiographs) are a basic tool for evaluating the size of the heart and increasing suspicion for heart disease but are better for determining progression to congestive heart failure, such as identifying fluid within or around the lungs.

A blood test (proBNP) can help confirm the presence of heart disease but will not necessarily determine severity.

Complete blood work and urine testing will provide overall health status to help determine which medications will be appropriate.

TREATMENT

Treatment depends on the cause, the stage of disease, and each patient's health status. In advanced cases, patients may require hospitalization, oxygen therapy, and/or injectable medications in an intensive care setting.

Stable patients and/or those requiring chronic management need a combination of the following drugs:

- Diuretics – (furosemide/spironolactone) utilize the kidneys to get rid of excess water into the urine to remove retained fluid out of the lungs. Many patients drink and urinate more often while taking a diuretic.
- ACE Inhibitors – (enalapril/benazepril) help the kidneys get rid of excess water, as well as reduce blood pressure so the heart can pump more effectively.
- Inotropes – (pimobendan) help increase the strength of the heartbeat and opens the blood vessels.

TIPS FOR SUCCESS

- Give medications as prescribed and do not alter the patient's medications without consulting with a veterinarian.
 - If concerned about potential side effects, consult with a veterinarian before abruptly stopping medications.
- Do not underestimate the impact of heart failure.
 - Even if patients appear to have returned to normal with treatment, most heart disease worsens with time.
 - Many patients require adjustments in medications.
 - Consult with a veterinarian about activity level to identify at-risk activity that should be avoided.
- Once a heart problem has advanced to the point of causing CHF, the long-term survival is guarded.
 - CHF is always serious and frequently compromises life expectancy.
 - With treatment, the goal is to extend comfort and quality of life.