



Herbert's Story

A2: HERBERT'S STORY

▶ 1.36 mins

We just got back from our holiday up north; it was earlier than we had planned because when we were travelling I was much more tired than usual. I was struggling to get my breath even when I wasn't doing very much. I've had heart problems for years and a heart attack when I was fifty-five, too much pressure in my job in the bank, after that they told me that I had high blood pressure, that I had to take things easy, change my diet and get a bit more exercise. Despite that the damage must've been done because two years into retirement I had another problem, they said it was heart failure. Now I've always known that apart from a heart transplant that might happen one day. You've got to live a little differently, so I don't overexert myself, and I've got a lot of living to do.

A4: SIX MONTHS LATER

▶ 2.27 mins

Nurse: Bert can you just tell me how you've been feeling the past few days?

Herbert: Not good really, I was better a few days ago, but today not right.

Nurse: That doesn't sound good, can you tell me a bit more about what's been happening?

Herbert: Well it's this damn breathing really. I can't move around the house without puffing, like a steam train. Like I've run up a flight of stairs or something. Of course I haven't but I might've just got up to go to the toilet or something like that.

Nurse: So when you sit back down again, how long does it take you to catch your breath?

Herbert: I try and tell myself breath in and out slowly; one of the physios told me to do that. Partly my own fault, sometimes I try to do too much. Starts off okay, then it catches up with me.

Nurse: It's going to be important to pace yourself and so we'll need to look at some ways in which you can conserve your breathing and conserve your energy. Is there anything that makes you feel better or worse?

Herbert: Most activity really. I'm mostly better sitting down doing nothing, but I find it very hard to do that. Tired, I'm always tired; I go to bed at night, I'm tired. I get up in the morning I'm tired. It's not the sort of tired that sleep seems to do anything for, so frustrating. I'm a man of action. Sitting around doing nothing, drives me mad.

Nurse: That sounds pretty rough. It's fairly common for people with heart failure to have feelings of overwhelming tiredness. How's your appetite going?

Herbert: Poor appetite really, I drive Molly nuts. She tries really hard to accommodate what I feel like eating; but it's partly my own problem. I used to be a meat and potatoes man, now I'm just having snacks. I make myself eat sometimes because of the diabetes but there's not much pleasure in it anymore.

A8: HIS ILLNESS PROGRESSES

▶ 2.15 mins

Doctor: Could you tell me about the main problems you've been having, the main symptoms over the last few weeks?

Herbert: Yes, well I feel pretty low, my heart isn't doing it's job. If I try to do too much I have difficulty catching my breath. I'm starting to lose weight too, because eating isn't much fun anymore, but breathing is the main problem. And well, last week I ended up in here.

Doctor: What about energy levels, can you do everything you want to do?

Herbert: Not really, I feel pretty tired all the time.

Doctor: Let's talk more about your breathlessness then. Specifically, is there anything that makes it better or anything that makes it worse?

Herbert: No, it's often there, even when I don't do too much; but it's much worse when I try to do things or try to walk.

Doctor: I know the nurses have given you the breathing exercises, and they can be very useful. The physiotherapist will come along and help you do those. The other thing of course is morphine. There are lots of studies now that show morphine can help considerably with breathing, we're not sure how it works but it does seem to help patients manage their breathing more and it reduces the sensation of breathlessness. So I would really advise a bit of morphine to see how it goes.

Herbert: I didn't know morphine was the thing to take for breathlessness. Isn't that addictive?

Doctor: Everyone worries about that, but when we use it in specific situations like this addiction isn't a problem. Addiction tends to be a problem when people are using it for psychological reasons or for 'kicks' so to speak. We have no difficulty getting people off morphine, but most people stay on it because they find it so useful for their breathing.

Herbert: Oh... (trails off)