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Denfeld QE, Winters-Stone K, Mudd JO, Hiatt SO, Lee CS.

J Cardiovasc Nurs. 2018 Jan/Feb;33(1):E1-E7. doi: 10.1097/JCN.0000000000000408.

PMID: 28353543

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Identifying a Relationship Between Physical Symptoms and Heart Failure Symptoms.

Denfeld QE¹, Winters-Stone K, Mudd JO, Hiatt SO, Lee CS.

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Abstract

BACKGROUND: Heart failure (HF) is a complex clinical syndrome associated with significant symptom burden; however, our understanding of the relationship between symptoms and physical frailty in HF is limited.

OBJECTIVE: The aim of this study was to quantify associations between symptoms and physical frailty in adults with HF.

METHODS: A sample of adults with symptomatic HF were enrolled in a cross-sectional study. Physical symptoms were measured with the HF Somatic Perception Scale-Dyspnea subscale, the Epworth Sleepiness Scale, and the Brief Pain Inventory short form. Affective symptoms were measured with the Patient Health Questionnaire-9 and the Brief Symptom Inventory-Anxiety scale. Physical frailty was assessed according to the Frailty Phenotype Criteria: shrinking, weakness, slowness, physical exhaustion, and low physical activity. Comparative statistics and generalized linear modeling were used to quantify associations between symptoms and physical frailty, controlling for Seattle HF Model projected 1-year survival.

RESULTS: The mean age of the sample (n = 49) was 57.4 ± 9.7 years, 67% were male, 92% had New York Heart Association class III/IV HF, and 67% had nonischemic HF. Physically frail participants had more than twice the level of dyspnea (P < .001), 75% worse wake disturbances (P < .001), and 76% worse depressive

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