

Returning to work with a heart condition

Heart Information Series Number 21



**British Heart
Foundation**

This is one of the booklets in the *Heart Information Series*. For a complete list of booklets, see page 33.

We welcome your comments on this booklet.
Please fill in the feedback form on page 41.

We update this booklet regularly. However, you may
find more recent information on our website
bhf.org.uk

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About this booklet

If you have just been diagnosed with a heart condition, or if your heart condition has recently got worse, you may be worried about whether you can carry on working, or how soon you can go back. Each person's circumstances are different, so it is not possible to say exactly how long you will need to stay off work for. However, this booklet outlines the factors you need to take into account when deciding if you can go back to work with your heart condition.

This booklet is not a substitute for the advice your doctor or cardiologist (heart specialist) may give you based on his or her knowledge of your condition.

Introduction

People react in different ways when they are told that they have a heart condition. Some decide to change certain aspects of their life, such as the type of work they do or where they live. Others want to get back to their normal routine, and especially to their usual work, as soon as possible.

The good news is that many people do return to work even though they have been diagnosed with a heart condition. Some go back to exactly the same job that they were doing before, and some make changes to their workload or their role. Others may decide to give up their current job and retrain for a less physically demanding job.

The main reason that most of us work is to provide an income. The work we do can also play a significant role in our self-esteem and general health and wellbeing. It is often at work that we meet many of our friends and social contacts. So, returning to work can be an important part of your recovery from a heart condition such as a heart attack. If you have a well thought-through plan for returning to work, you might be able to go back to having as full a role as possible in your workplace. Or, you might need to identify a more realistic option.

If you decide not to go back to your previous paid work, you may be able to find meaning and purpose through other forms of work if these are more realistic. For example, you may be interested in part-time voluntary work, either as a stepping stone to another job, or as part of your retirement.

Factors that may affect your return to work

There are several things you need to take account of when you are thinking about returning to work with a heart condition.

- **The type of heart condition you have** and whether or not your condition is stable and under control.
- **The type of treatment** you need and how long it will take you to recover after the treatment.
- **The type of work you do** – for example, whether your job involves heavy lifting or digging, or operating heavy equipment.
- **Whether you need a driving licence** to do your job and, if so, what type of licence.
- Other factors include:
 - how stressful you find your job
 - your level of confidence
 - whether you feel anxious about your heart condition, and
 - how far you have to travel to get to work.Also, your workplace or professional organisation (the organisation that regulates

the type of work you do) may have specific regulations about whether and when you can return to work with your particular heart condition.

We look at all these factors on the next pages.

Your heart condition

The type of heart condition you have, how severe it is, and whether your condition is stable will be major factors in how soon you can return to work.

For example, you may have:

- coronary heart disease (angina and heart attack)
- arrhythmias (irregular heartbeats)
- valvular heart disease (disease of the heart valves)
- cardiomyopathy (disease of the heart muscle),
or
- congenital heart disease (heart disease that you were born with).

High blood pressure is not strictly a heart condition but it is a risk factor for coronary heart disease. (A risk factor is something that increases the risk of getting a disease.) Many people whose high blood pressure is under control carry on working as normal. However, if you have uncontrolled high blood pressure, all the factors mentioned on page 7 are relevant.

Also, some people may be diagnosed with heart failure because of their heart condition. If you have heart failure, all the factors mentioned on page 7 are also relevant when considering returning to work.

We have produced booklets on many of the heart conditions mentioned above. See page 33 for a list of booklets, and page 32 for how to order copies.

Is your condition stable or unstable?

Whatever type of heart condition you have, you are more likely to be able to return to work if your condition is stable and the symptoms are well controlled.

What do 'stable' and 'unstable' mean?

A stable heart condition is one that is under control with treatment. For example, treatment with coronary angioplasty can help stabilise coronary heart disease, relieving the symptoms of angina. Or drugs such as beta-blockers can help control arrhythmias, so that you are less likely to have frequent episodes of fast palpitation.

Many people have angina that comes on with a particular amount of exercise, and is well controlled with drugs. This is known as **stable angina**.

Unstable angina is angina which has just developed for the first time, or angina which was previously stable but has recently got worse or changed in pattern. For example, the angina pain may come on after an unpredictable amount of

exercise, or when you are under stress, or even while you are resting.

Your doctor or cardiologist (heart specialist) will help you to identify if your heart condition is stable and well controlled. If you find that you are getting symptoms more often or more severely than you were before, you should tell your doctor.

Symptoms that could mean that your heart condition is unstable

The following symptoms could mean that your heart condition is unstable.

- If you get chest pain or discomfort when you exert yourself very little, or if you get chest pain or discomfort for the very first time.
- If you get chest pain or discomfort when you are resting or sleeping.
- If you get short of breath on exertion for the first time, or if you get short of breath more often than usual, or with less and less exertion.
- If you get palpitation for the first time, or more frequently than before.
- If you feel faint or generally unwell for no obvious reason.

If you have any of the above symptoms, or any other symptoms that you think may be linked to

your heart condition, speak to your GP or cardiologist. He or she can help you to decide if you are fit enough to work, and will advise you if you need any further tests or treatments.

If you have had a heart attack

If you have had a heart attack, the length of time you will need off work will depend on the amount of damage that the heart attack did to your heart muscle, and on the type of work you do. Your cardiologist, GP and cardiac rehabilitation team will help you to decide when you are fit enough to return to work.

The type of treatment you need, and the recovery time

There are various types of treatments for heart disease. Generally speaking we can divide these treatments into three main types.

- **Treatment with medicines.** This usually involves taking tablets for long periods of time, usually for life.
- **Minimally invasive treatments.** These are treatments that involve very small wounds and are often done with just a local anaesthetic rather than a general anaesthetic. Examples of minimally invasive treatments include coronary angioplasty with stent for coronary heart disease, or radio-frequency ablation treatment for arrhythmias. (We describe these in more detail in our booklets *Coronary angioplasty and coronary bypass surgery* and *Palpitation*.) You may still need to take medicines with this type of treatment.
- **Surgery.** The traditional approach to heart surgery involves a large wound along the breastbone. A newer approach, called 'minimally invasive surgery', involves making a smaller wound. If you have surgery, you will still

need to take medicines.

The length of recovery time needed after each type of treatment varies depending on how invasive the treatment is. Generally speaking, the more invasive the treatment, the longer it will take you to recover. For example, the expected recovery time after a coronary angioplasty with stent (a minimally invasive treatment) is much shorter than the expected recovery time after having coronary artery bypass surgery.

If your surgeon uses the traditional approach to heart surgery, which involves breaking the breastbone, your doctors will advise you to avoid any heavy lifting until the bone has healed. That can take about two to three months.

Your recovery time also depends on your overall condition and how successful the treatment has been at stabilising and improving your condition. It is not possible to give exact recovery times for everyone after each type of treatment. The best thing to do is to discuss your case with your cardiologist, your GP, or your cardiac rehabilitation team.

The type of work you do

If you do manual work that involves lifting or moving heavy objects, or if you operate heavy equipment, and you have just been diagnosed with a heart condition, you should discuss, with your GP or cardiologist, whether you are fit enough to return to work. You shouldn't keep lifting heavy objects or operating heavy equipment if, when you do a small amount of physical activity or exercise, you get chest pain or discomfort, or get short of breath, or feel palpitation.

If your doctor has told you that you should avoid these sorts of activities, you should tell your employer. Ideally, negotiate a change in your role or workload until your doctor has said it is OK for you to return to your previous role. If this isn't possible, see *Changing jobs because of your heart condition* on page 27 for more information.

If you have a sitting-down job – for example, if you work at a desk with a computer – you will probably be able to return to work sooner than someone who has to carry or lift heavy objects as part of their day-to-day job. However, you may find that you want to negotiate a change in your role until you are confident that you can take on the same workload as before.

Driving

There are restrictions on driving for people with certain heart conditions. However, it is not possible to list all the details about driving with heart conditions here as it depends on the type of licence you hold, the type of heart condition you have and how stable your condition is. For information, you should contact the Driver and Vehicle Licensing Agency (DVLA) on 0870 600 0301 or visit their website at www.dvla.gov.uk.

Remember that even if the DVLA doesn't need to know about your condition or treatment, you may need to tell your insurance company about it, to check that your insurance is still valid.

Other factors

Stress

Stress generally happens when we feel unable to cope with high demands that are placed on us. For example, you might have a workload that you can usually cope with very well but, if you are feeling unwell, it can become too much.

Some people worry that the stress from their job could make their heart condition worse, or increase their risk of having complications such as a heart attack. We cannot say for certain that stress is a definite risk factor for coronary heart disease, but we believe that stress may contribute towards it.

What we know so far is that stress can affect the heart by releasing certain hormones that increase blood pressure and can encourage clotting in the arteries. Stress can increase the production of cortisol and adrenaline – chemicals which prepare the body to react to a new challenge. Research is being carried out to understand more about what happens when the body releases too many chemicals, how this can lead to fatty deposits building up in the arteries, and how it can make the blood more likely to clot and increase blood pressure.

How you actually cope with stress could either increase or reduce your risk of heart disease. For example, if you smoke, overeat, or drink too much alcohol as a way of coping with stress, you are increasing your risk of heart disease. However, if you cope with stress by going for a brisk walk at lunch time or by going to the gym after work, you are reducing your risk.

It is important to remember that some stress in life can be positive, particularly if it allows you to do the activities that you find rewarding. You may find that boredom is as stressful as having too much to do! You will be the best judge of what level of stress you can cope with. If possible, talk to your employer about the level of stress you think you can manage.

For more information on coping with stress, see our booklet *Stress and your heart*.

Lack of confidence and anxiety

It is quite common for people to feel anxious or depressed after being diagnosed with a heart attack or another heart condition. Or, if you've been in hospital, you may feel anxious when you get back home – just when you're expecting to start feeling better – or this may happen after some

months. Your feelings may be due to a variety of reasons – for example, being worried that you are not making very good progress, or that you might have another heart attack, or even being afraid of dying. Or you may have doubts about how successful your treatment or operation will be.

It can take time for what your condition means to sink in. These fears and changing emotions are normal and a natural reaction to the stress of what's happening to you. You will probably have good days and bad days. However, most people start to feel better as time passes and as they get back into their usual routine, and the anxiety starts to reduce.

Getting back to work and to your usual routine could help you to get through this period of anxiety. However, it may be that work has become a source of stress for you. If this is the case, try talking to your employer to see if you can make changes that would reduce your workload. You may find it is easier to get your confidence back by phasing in your return to work by going back for two to three days a week to start with, until you feel more confident.

If your employer is not willing or able to help you,

see *Changing jobs because of your heart condition* on page 27 for more information.

Workplace or professional regulations

Some people – for example pilots, or those working on an oil rig or in the armed forces – have to have regular health check-ups. If you have this sort of job and have a heart condition, your employer may ask you to have a specific health check-up and reassessment. Your employer will let you know what tests you need to have before you can go back to your usual job. Some large employers have an occupational health department which can also assess whether you can return to work and the workload that is suitable for you.

Travelling time to work

There is no specific evidence to say that travelling a long distance every day will make your heart condition worse. If you have made a good recovery from your heart illness and your condition is stable, there may be no reason why you can't go back to your usual routine, including travelling to work. It would be wise to speak to your doctor or nurse about this.

However, some people can find the journey to work stressful, especially if they have to travel a

long distance there and back every day. As mentioned on page 17, we cannot say for certain that stress is a definite risk factor for coronary heart disease, but we believe that stress may contribute towards it. The decision about whether or not to carry on travelling a long distance to work is one you will probably have to weigh up along with all the other factors we have already mentioned.

Early retirement or redundancy

You may feel that you want to go back to work with the same energy as before. If your doctor is happy for you to do this, there's no reason why you shouldn't. However, you may decide that now is a good time to look at the balance between your work and your home life. Some people find that they have a different attitude to their work and make a more conscious effort to 'switch off' once they leave work at the end of the day. Some choose to reduce the time they spend at work by going part-time and reducing their hours. Others explore the option of taking early retirement or a redundancy package that may be available from their employer.

Early retirement will have financial and practical consequences for you and your family. So, you need to gather all the facts from your employer or your local Jobcentre Plus office before making your decision.

If you take early retirement, you cannot claim the state pension until you reach state pension age. To get a forecast of how much you could expect to receive at retirement age, contact the Department for Work and Pensions Forecast Service on 0845 3000 168.

You won't have to pay National Insurance contributions again unless you start work again before you reach retirement age. However, you may need to pay extra National Insurance contributions to make sure you get your full basic retirement pension when you reach state pension age. For information on whether you should continue to pay National Insurance contributions if you stop working before retirement age, contact the Work and Pensions Forecast Service on 0845 3000 168. You may also want to get in touch with your local citizens advice bureau or Inland Revenue office for more information.

Statutory Sick Pay and Incapacity Benefit

If you have to take sick leave from work because of your heart condition, you may be entitled to Statutory Sick Pay. This is paid by your employer and lasts for up to 28 weeks. If you do qualify for Statutory Sick Pay, there is a minimum amount of money that your employer must pay you. Your employer will tell you what you are entitled to and how much they will pay you. Some employers may choose to pay you your full salary. It varies from one employer to another.

If you are not entitled to Statutory Sick Pay, you may be eligible for Incapacity Benefit. Incapacity Benefit is usually paid by the state if you are not eligible for Statutory Sick Pay. If you are in hospital for a long time and you are not receiving Statutory Sick Pay, you could ask a social worker in the hospital if you can claim Incapacity Benefit.

If your Statutory Sick Pay has ended and you still cannot work, you may receive Incapacity Benefit. This is usually paid as a short-term benefit but, if you have been off sick for more than 52 weeks, you may be eligible for long-term Incapacity Benefit.

For more information on Incapacity Benefit, contact your local Jobcentre Plus office. You can find the

number in your local phone book, or visit their website on www.jobcentreplus.gov.uk

This information on benefits is likely to change in the future because of new government laws. Your local Jobcentre Plus office or Social Security office will be able to give you the most up-to-date information on benefits.

The Disability Discrimination Act

The Disability Discrimination Act defines disability as a physical or mental impairment which has a substantial and long-term adverse effect on a person's ability to carry out normal day-to-day activities.

If you have been registered as disabled because your heart condition is so severe, your employer must make 'reasonable' adjustments to allow you to return to work. It is not possible to outline what a reasonable adjustment is in this booklet as it varies greatly from one situation to another. However, the Disability Rights Commission on 08457 622633 will be able to help you with this. You can download the leaflet *What are reasonable adjustments?* from their website at www.drc-gb.org.

If you are not considered to be disabled but are still not fit enough to return to your usual job, your employer legally does not have to make any adjustments to allow you to return to work. If this is the case for you, see *Changing jobs because of your heart condition*, on the next page.

Changing jobs because of your heart condition

A small number of people with heart conditions will be advised by their doctors that they are no longer fit enough to carry out their previous job because of their heart condition. If this happens to you, it doesn't necessarily mean that you can never work again. It may be that your previous type of work was very physically demanding but that another type of work would be more suitable.

If your doctor has told you to avoid heavy lifting or any type of work that is physically demanding, but that a sitting-down job would be more suitable, it would be advisable to get in touch with your local Jobcentre Plus office or Social Security office. They will be able to tell you more about the options that are open to you. These may include the following.

- You should register for the appropriate benefits until you are fit enough to start looking at other job options.
- Meet with a disability employment adviser. This is someone who provides support for people who are recently disabled, or those whose health condition has got worse, and who need

advice on employment. They can give advice on many issues including:

- keeping your current job
- assessing your suitability for jobs
- preparing for work
- retraining, and
- access to work.

- Register for New Deal for Disabled People. This is designed to help unemployed people who are claiming a disability or a health-related benefit and who want to work but may need help finding the right job.
- You may be able to get ‘in-work benefit’. This can include working tax credits, and housing-related rebates.
- They will also be able to tell you which benefits you can claim if you work less than 16 hours a week.

Voluntary work

Taking part in voluntary work is a great way to meet new people, learn new skills and gain useful experience. Many people with heart conditions find that it has other important benefits too. If you have been unable to continue with your usual work, volunteering can be a useful stepping stone either back to your regular job or to a new career. Voluntary work can also help build your confidence, especially if you're doing tasks that involve taking on some responsibility or working with people.

Before taking on any volunteering, think about:

- what you want from volunteering
- what you have to offer, and
- how much time you can give.

Once you start volunteering you should usually expect:

- a clear idea of what your role will be
- appropriate training and support, and
- reasonable out-of-pocket expenses (for example, travel expenses).

Most charities readily welcome volunteers. You may want to choose one which you or your family have a particular interest in. There is a wide range

of volunteering opportunities within the British Heart Foundation. For more information, visit our website at bhf.org.uk/volunteer or e-mail volunteering@bhf.org.uk or phone 020 7725 0657. For general information on volunteering, visit www.do-it.org.uk.

Heart support groups

Many people with heart problems, especially those who have suffered a heart attack or have had heart surgery, may feel the need to meet other people who have had the same experience and find it helpful to join a 'heart support group'.

Activities vary from group to group, but may include a listening service, exercise classes, and regular meetings or invited speakers on a wide range of topics.

The British Heart Foundation's patient network team supports the groups by developing and delivering training to encourage best practice and networking among heart support groups. For details of your local support group, contact our Cardiac Care department on 020 7487 7110.

For more information

British Heart Foundation website

bhf.org.uk

For up-to-date information on the BHF and its services.

Heart Information Line • 08450 70 80 70

(A local rate number.)

An information service for the public and health professionals on issues relating to heart health.

Publications and videos

The British Heart Foundation (BHF) also produces other educational materials that may interest you.

To find out about these, or to order your

Publications and videos catalogue, or to order publications, please go to **bhf.org.uk/publications**, call the **BHF Orderline on 0870 600 6566** or email **orderline@bhf.org.uk**. You can download many of our publications from **bhf.org.uk/publications**

Our publications are free of charge, but we would welcome a donation.

Heart Information Series

This booklet is one of the booklets in the *Heart Information Series*. The other titles in the series are as follows.

- 1 Physical activity and your heart
- 2 Smoking and your heart
- 3 Reducing your blood cholesterol
- 4 Blood pressure
- 5 Eating for your heart
- 6 Angina
- 7 Heart attack and rehabilitation
- 8 Living with heart failure
- 9 Tests for heart conditions
- 10 Coronary angioplasty and coronary bypass surgery
- 11 Valvular heart disease
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- 18 The heart – technical terms explained
- 19 Implantable cardioverter defibrillators (ICDs)
- 20 Caring for someone with a heart condition
- 21 Returning to work with a heart condition
- 22 Diabetes and your heart

Heart health magazine

Heart health is a free magazine, produced by the British Heart Foundation especially for people with heart conditions. The magazine, which comes out four times a year, includes updates on treatment, medicines and research and looks at issues related to living with heart conditions, like healthy eating and physical activity. It also features articles on topics such as travel, insurance and benefits. To subscribe to this **free** magazine, call **0870 600 6566**.

Heartstart UK

For information about a free, two-hour course in emergency life-support, visit our website at bhf.org.uk or contact Heartstart UK at the British Heart Foundation. The course teaches you to:

- recognise the warning signs of a heart attack
- help someone who is choking or bleeding
- deal with someone who is unconscious
- know what to do if someone collapses, and
- perform cardiopulmonary resuscitation (CPR) if someone has stopped breathing and his or her heart has stopped beating.

Making yourself heard – Hearty Voices

Patients and their carers can be involved in policy and planning at all levels of the NHS, representing

heart patients and their carers on issues which are important to them. However, to do this you will need certain skills and an understanding of health systems and medical jargon. The Hearty Voices project aims to provide support with this. To find out more, contact our Cardiac Care department on 020 7487 7110.

Other useful organisations

Citizens Advice

Phone: 020 7833 2181

Website: www.citizensadvice.org.uk

Department for Work and Pensions Forecast Service

Phone: 0845 3000 168

Contact them for a forecast of the pension you can expect when you reach state retirement age, and to find out if you need to continue making National Insurance contributions if you stop working before you reach retirement age.

Disability Rights Commission

Phone: 08457 622633

Website: www.drc-gb.org

Jobcentre Plus

www.jobcentreplus.gov.uk

About the British Heart Foundation

The British Heart Foundation (BHF) is the leading national charity fighting heart and circulatory disease – the UK's biggest killer. The BHF funds research, education and life-saving equipment, and helps heart patients return to a full and active way of life.

We rely on donations to continue our vital work. If you would like to make a donation, please ring our **credit card hotline on 0870 606 3399**. Or fill in the form opposite.



Please send me information about the following.

- BHF publications**
- Giving regular donations**
Regular donations through a standing order give us the long-term support we need. Just tick for information on how to set up a standing order.
- Remembering us in your Will**
Many people choose to leave a gift to their favourite charities in their Will. We can send you a useful information pack to tell you how to go about it.
- Local fundraising activities and sponsored events**
- Payroll giving**
How you and your work colleagues can donate from your salaries before tax.
- Buying BHF Christmas cards and gifts**
- Becoming a volunteer in a British Heart Foundation shop**

Please send your form to the British Heart Foundation. The address is over the page.

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Your comments please

We would be very interested to hear your views about this booklet.
Please fill in this form and send it to:

British Heart Foundation

FREEPOST WD513

LONDON W1E 1JZ.

1 How did you get this booklet?

I got it directly from the British Heart Foundation.

My GP or practice nurse gave it to me.

I got it from a display at my GP's surgery or health centre.

A nurse or doctor at the hospital gave it to me.

I got it from a display in a hospital.

A friend or relative gave it to me.

Other (Please give details.) _____

2 Do you find this booklet...

very helpful?

helpful?

not very helpful?

not at all helpful?

3 Do you find this booklet ...

very easy to understand?

easy to understand?

not very easy to understand?

4 What do you think of the design of the booklet (how it looks, the size of the text, the front cover, the size)?

Very good

Good

Not very good

Poor



5 Are there any issues that you need to know about that are not covered in this booklet? If so, what are they?

6 Do you have any other suggestions for how we could improve this booklet?

7 Are you...

...a patient with a heart condition?

...a carer (for example, a relative or friend of someone with a heart condition)?

Other (Please give details.) _____

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The British Heart Foundation would like to thank all the GPs, cardiologists and nurses who helped to develop the booklets in the *Heart Information Series*, and all the patients who commented on the text and design.

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Heart health is a free magazine produced by the British Heart Foundation especially for people with heart conditions. See page 34 for more information.

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Heart Information Line • 08450 70 80 70

(A local rate number.)

An information service for the public and health professionals on issues relating to heart health.