

Appendix 4: Nonpharmacological management of heart failure

Non-pharmacological treatment or modification	Description
Exercise and rehabilitation	Regular exercise is recommended to improve exercise capacity, symptoms, and quality of life and to reduce hospital admissions. It should be individualized for each patient.
Dietary salt intake	Most HF patients should restrict their dietary salt to 2-3 g/day but the optimal quantity should take into consideration other factors such as clinical situation, severity of symptoms and baseline consumption.
Daily fluid intake	For patients with fluid retention not easily controlled with diuretics, clear fluid overload, hyponatremia or demonstrated sensitivity to fluid intake, daily fluid intake should be restricted to 2 L/day.
Alcohol intake	Alcohol intake should be avoided if it is a precipitating or contributing factor.
Smoking cessation	Smoking cessation is encouraged in all HF patients.
Vaccines: Influenza and Pneumococcal	HF patients are at higher risk of complications and contracting these illnesses can worsen HF. Vaccination is recommended.

Beique LC, et al. 2017 Guidelines for the management of heart failure by pharmacists. *Can Pharm J* (Ott) 2019;152(5). DOI: 10.1177/1715163519853307.