

The 'cardiac blues': A guide for patients

What is the cardiac blues?

For most people, having a heart attack or requiring heart surgery comes as a huge shock. It makes you realise you're not immortal, which can be extremely distressing and upsetting. Most people experience changes in mood and emotions after their cardiac event.¹ This is known as the 'cardiac blues'. When you leave hospital you may find yourself on an emotional rollercoaster. Some people feel angry, irritable and frustrated. Some people feel sad, distressed and depressed. Some people feel anxious and fearful, and worry about whether they will fully recover. Some people feel all of these things. These common emotions are listed below.

Common emotions associated with the cardiac blues

Emotional symptoms	
SHOCK	You might find it hard to believe that you have a heart problem.
DENIAL	You might find it hard to accept that this has happened to you.
WORRY & ANXIETY	You may worry that you will never get back to your old self. You might be fearful about dying.
SADNESS & DEPRESSION	You may feel low and miserable or your mood might be up and down.
FRUSTRATION & ANGER	You may become frustrated and irritated about the changes in your life.
GUILT	You might feel guilty about being dependent or blame yourself for what has happened.

The cardiac blues also brings a number of changes in your behaviour and thinking (cognition), as listed below. Many people think the worst and worry that things will never be normal again.

Common behaviours and thoughts associated with the cardiac blues

Behavioural symptoms	Cognitive symptoms
Loss of interest in usual activities	Confusion and forgetfulness
Withdrawal from others	Inability to concentrate
Getting tearful and crying easily	Bad dreams or nightmares
Being short tempered	Difficulty making decisions
Sleep problems	Worry about another heart event
Change in appetite & sex drive	Thoughts about death



Is it normal to go through the cardiac blues?

The emotional, behavioural and cognitive aspects of the cardiac blues are all common; almost all people get the cardiac blues.² This is a natural and normal part of having a heart attack or heart surgery.

How long will the cardiac blues last?

The good news is.... for most people the cardiac blues go away in the first few months after the cardiac event. By around the 2-month mark you will start to get back to your usual self and things will begin to get back to normal.¹

Is the cardiac blues the same as depression?

Depression is different to the cardiac blues. The two key features of depression are profound feelings of sadness most of the time, and lack of interest or enjoyment in most activities, including activities that you enjoyed prior to your heart event. Some people have thoughts of suicide or self-harm. One in five people go on to experience severe depression after a heart attack or heart surgery.¹

Depression makes people less able to look after themselves. People who become depressed in the year after a heart event are less physically active, more likely to smoke, have a less healthy diet, are less likely to take their medications as prescribed or to go to cardiac rehabilitation, and have worse health outcomes over time.^{3,4} It is important to get help if you believe you are depressed.

How do I know if I have the cardiac blues or if I am depressed?

It is difficult to know whether you have cardiac blues or whether you are depressed, as the symptoms of the cardiac blues and depression appear very similar. There are two ways you can distinguish between the cardiac blues and depression:

1. **Time since your heart event:** The cardiac blues should resolve in the first two months after your heart event. By two months your mood should be getting better. If you are still experiencing mood difficulties two months after your cardiac event, then you may be depressed.⁵
2. **Red flags for depression risk:** There are some 'red flags' that can tell you whether you are at increased risk of developing depression after your heart event.⁶ These are listed below. If you tick two or more red flags, you may be at risk of developing depression.

Red flags for increased depression risk

You are at increased risk of depression if:
<input type="radio"/> you have had severe anxiety or depression in the past, before your heart event
<input type="radio"/> you are under 55 years of age
<input type="radio"/> you are isolated or live alone, or have no-one to talk to
<input type="radio"/> you have financial worries
<input type="radio"/> you have been stressed at home or work, or have lost your job
<input type="radio"/> a loved one has died recently, or you have recently divorced or separated
<input type="radio"/> you regularly use cigarettes, drugs or alcohol
<input type="radio"/> you have diabetes or other major health problems



Regaining control with EASSE

Having a heart event can make you feel that you are not in control of your life any more.⁷

The EASSE model provides five key tips for improving your mood and regaining control after your heart event. It is important to have a combination of **Enjoyment** and **Achievement** activities, to have strong **Social** connections, a regular **Sleep** pattern and to **Exercise** regularly and **Eat** well.

Use the EASSE model, to help regain control of your life.

E	ENJOYMENT ACTIVITIES	Enjoyment activities are relaxing and nurturing, and give you a sense of pleasure and joy.
A	ACHIEVEMENT ACTIVITIES	Achievement activities are more challenging and difficult, and give you a sense of competence, confidence and mastery.
S	SOCIAL CONNECTIONS	Spending time with others gives you pleasure, helps you feel better, provides support and makes you feel that you belong.
S	SLEEP	Sleep is commonly disrupted after a heart event. One of the best ways to feel better emotionally and physically is to have a good sleep pattern.
E	EXERCISE & EATING	Exercise gives you a feeling of wellbeing, improves your mood and reduces depressive symptoms. Healthy Eating is important for both physical and mental wellbeing.

A final note

If you are concerned about your emotional recovery, or if you think you might be experiencing anxiety or depression, make an appointment to talk with one of our Registered Cardiac Counsellors in our Cardiac Counselling Clinic. We offer effective treatments for anxiety, depression, stress, trauma and post-traumatic stress which will improve your mood and quality of life.

You can find out more by visiting our website www.australianhearthealth.org.au

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References

1. Murphy B, Higgins R, Jackson A. Anxiety, depression and psychological adjustment after an acute cardiac event. In: Alvarenga M, Byrne D, ed. *Handbook of Psychocardiology*: Springer; 2015.
2. Murphy BM, Higgins RO, Jackson AC, Edington J, Jackson A, Worcester MU. Patients want to know about the 'cardiac blues'. *Australian Family Physician* 2015;44:826-32.
3. Murphy BM, Le Grande M, Navaratnam H, et al. Are poor health behaviours in anxious and depressed cardiac patients explained by sociodemographic factors? *Eur J Prev Cardiol* 2012;20:995-1003.
4. Murphy BM, Rogerson M, Worcester MUC, et al. Predicting mortality 12 years after an acute cardiac event: comparison between in-hospital and 2-month assessment of depressive symptoms in women. *Journal of Cardiopulmonary Rehabilitation and Prevention* 2013;33:160-7.
5. Murphy BM, Elliott PC, Higgins RO, et al. Anxiety and depression after coronary artery bypass graft surgery: most get better, some get worse. *Eur J Cardiovasc Prev Rehabil* 2008;15:434-40.
6. Murphy BM, Elliott P, Ludeman D, et al. 'Red flags' for anxiety and depression after an acute cardiac event: 6-month longitudinal study in regional and rural Victoria. *Eur J Prev Cardiol* 2014;21:1079-89.
7. Higgins RO, Murphy BM, Nicholas A, Worcester MU, Lindner H. Emotional and adjustment issues faced by cardiac patients seen in clinical practice: a qualitative survey of experienced clinicians. *J Cardiopulm Rehabil Prev* 2007;27:291-7.