



Every day in Northern Ireland, around 4 men are admitted to hospital due to stroke. Men like Philip Annett, who attended our Craigavon Post Rehab Exercise Programme (PREP) after having a stroke in his forties.

Philip, 49 from Portadown, was in the middle of a short career break which often saw him travelling across the world to destinations including the Philippines and South Korea, when he had a sudden stroke on the 22nd of October 2022.

Philip explains, "My 16-year-old son Ethan and I were in Lisburn building a fence at my mother in law's house. After lunch, I didn't feel well. I felt like I had a dizzy head, although it wasn't a normal dizziness. I thought it would get better, but it didn't go away."

"Ethan was asking me, 'Are you okay?' but I couldn't reply to him because my speech had gone. Thankfully, Ethan knew straight away it was a stroke and got me inside the house and phoned for an ambulance. He was told it would take two hours and it would be quicker to get me in a car if possible, so my wife Denise helped me into the car and drove to Craigavon."

"They scanned me and found out I had a clot on my brain caused by a dissection in the left carotid artery. I received the clot busting drug Thrombolysis and was then blue lighted to the Royal Victoria Hospital in Belfast where the team were waiting to bring me into surgery."

"There were several people in that team, nurses and surgeons, who came in late on a Saturday afternoon when they weren't on duty. It's amazing that those people, who didn't know me, came in of their own free will to treat me. I had a Thrombectomy which saved my life."

"As I was wheeled back towards the recovery ward, I put my thumbs up to my wife and was trying to speak to her which was amazing as just before the surgery I had no comprehension and couldn't communicate at all. Now I was starting to speak and understand again."

By the Monday, Philip was walking around with physios and was discharged back to Craigavon Area Hospital. He started speech therapy and was classed as having moderate to severe aphasia and dysphasia. Aphasia is when a person has difficulty with their language or speech, and dysphasia is an impaired ability to understand or use the spoken word.

Philip says, "My mobility was okay at that stage, my speech was the main problem. I could say words when looking at a picture, like dog or cat. I also had to work on my writing and reading – even now, I would still struggle a bit with reading a book. I was then transferred to Loane House in Dungannon and received speech therapy 3 or 4 times that week. When I was discharged the speech therapists continued to visit me at home. My speech got better then really quickly."

"I would say the hardest part of my struggle was actually from then on. You would think everything was back to normal - my speech and mobility were okay - but I was out of routine, not working and I didn't know what to do with myself. Anxiety played a big part and still does, although I'm getting a lot better. After you've had a stroke, when you have any little pain or twitch, you think, is this another stroke? It was the lack of confidence that really affected me."

"The NICHS PREP programme really helped. When I first went, I was like a rabbit in the headlights. I was thinking, if I do too much will I have another stroke? Having that reassurance from Zoe and Rita from NICHS was the key thing. They gave you that gentle push along or the tough love with a smile on their face when you needed it."

"It gave you a reason to get out of bed in the morning. You were meeting people who have been through the same thing and are in the same boat. The follow up on a personal level was so important – to have people that were interested in you, in where you were at, the level of progress you were making, and where you could get to was so important. The NICHS team are bright, positive and willing to listen."

Chat Heart B. Short

Philip has recently returned to work and he does not want to let his stroke define him. He says, "My stroke is part of my story and always will be, but my story is not over. I don't want to be identified as a 'stroke survivor' or someone to feel sorry for – I'm just Philip. Everybody goes through difficult things in their lives. It's important to talk about it openly, but you have to try and build back what was normal too, the things that you enjoy, and then move forward."

"It's not the end, it's the beginning of a life that might be slightly different, but it's still a life that's worth living."

For more information on NICHS stroke services, visit nichs.org.uk/our-support-services/stroke

KNOW THE SYMPTOMS OF A STROKE

FACE - has their face fallen on one side? Can they smile?

ARMS - can they raise both arms and keep them there?

SPEECH - is their speech slurred?

TIME - to call 999 if you see any single one of these signs.





DO SOMETHING AMAZING - FUNDRAISE FOR US IN 2023/24

There are so many ways you can fundraise for us so why not take up the challenge and join #TeamNICHS?



Friday 29th September, Walk To Remember, Hillsborough Forest Park



Sunday 8th October,Tower Museum Abseil, L/Derry



Sunday 29th October, Dublin Marathon, Dublin



Wednesday 15th November, Run In The Dark, Stormont Estate, Belfast



Sunday 25th February,Red Dress Fun Run, Stormont
Estate, Belfast



Sunday 7th April, London Landmarks Half Marathon, London



Sunday 24th April, London Marathon, London



Sunday 5th May, Belfast City Marathon, Belfast

Anytime Events

- Run / Walk / Bike / Hike / Abseil To Remember
- Host A Heartfelt Morning Break
- Skydive
- Take part in a third-party event
- Ultra Challenge Series

Don't forget to Gift Aid your donation to add an extra 25%!

For more information, or to sign up, visit nichs.org.uk/events or contact our Events team on events@nichs.org.uk or 028 9032 0184.

Superstar Supporters



Newry's Niamh Gollogly and Claire McCone from Armagh are certainly 'summit' else after reaching the top of Mount Kilimanjaro and raising an incredible £4,100 for our work.

The friends trekked 5,895 metres up Africa's tallest mountain in June, as well as hosting other fundraising events such as a coffee morning and quiz night earlier in the year. They wanted to help us raise awareness and give back to our charity following Niamh's dad Finbarr attending our Newry PREP group. Our massive heartfelt thanks to these tremendous trekkers.



Darren Mallon from Craigavon has been a fantastic supporter of our charity over recent months, completing a number of running fundraisers including the Dublin, London, and Belfast Marathons, when he ran from his home in Craigavon to Belfast before the race even started!

Darren also took on the Norn Iron Ultra in June, a gruelling 106.9-mile ultra-run along the North Antrim coast, a challenge most of us could only dream of! We are very grateful to Darren for all his efforts which have raised a fantastic £3,060 for our charity.



We are delighted to be funding 5 new research projects this year. Read on to find out more about 2 of these exciting studies.

CAN AN OVER-THE-COUNTER MEDICATION FOR COLD SORES HELP IN THE FIGHT AGAINST COPD?

Dr Dermot Linden, Queen's University Belfast

COPD is a major cause of illness and death in Northern Ireland. Almost 43,000 people are registered with their GP as having COPD - and there could be more.

Dr Linden and his team want to test whether Valaciclovir, a type of cold sore medication, could be a new therapy for sufferers of COPD. They have used it to successfully treat Epstein-Barr Virus (EBV) - research we previously funded - which they detected at high levels in the lungs of people with COPD. They hope to carry out a bigger study in the future, testing the medication on larger numbers of people, and the study would help shape that study.

Doing this smaller scale lab study, will help the team understand how cells in the lungs respond to Valaciclovir, and whether this medication has the potential to be a future treatment for COPD. They can then use the results to plan a larger study. A larger study will allow the team to establish with more confidence that Valaciclovir is an effective treatment.

CAN WE DEVELOP A LATERAL FLOW DEVICE TO TEST FOR HEART FAILURE?

Dr Chris Watson, Queen's University Belfast

Heart failure (HF) is a serious condition, where the heart cannot pump blood very efficiently. Almost 20,000 people across Northern Ireland have been diagnosed with HF, but it's likely there are many more undiagnosed, as it shows no symptoms in the early stages.

CLEC3B is a chemical found in heart tissue. In research previously funded by us, Dr Watson and his team showed that it plays a role in the development of HF. They found CLEC3B in the blood, but also in saliva. This is exciting because saliva samples can be tested using lateral flow devices. We are funding Dr Watson to confirm his earlier findings and to develop a lateral flow device.

A reliable lateral flow test for HF would speed up diagnosis and could even be done at home. This would be cost effective and a convenient way of detecting whether someone is at risk which is important as HF usually shows no symptoms in the early stages. Often people don't seek help until the disease has progressed to an advanced stage and is having a serious impact on them. Whilst there isn't a cure for HF currently, identifying it early will mean getting the right treatment in place early. This will keep the symptoms under control for as long as possible and ensure a good quality of life.

Our research is fully funded by public donations. We are incredibly grateful to you for investing in our research so together we can have a healthier NI free from chest, heart and stroke conditions. Find out more about NICHS research projects at nichs.org.uk/research



On Sunday 26th February we celebrated the return of our Red Dress Fun Run, proudly supported by our charity partner MACE and sister company Musgrave MarketPlace, to Stormont Estate. The all-inclusive fun run was a huge success with over 700 supporters completing the 5k run or walk and an incredible £73,000 being raised. A huge heartfelt thank you to everyone who took part or donated. Diane Anthony from Musgrave says; "We are so proud to support NICHS, and this fantastic event, for another year. It was great to see so many people get behind this worthy cause."

Planning is already underway for Red Dress Fun Run 2024 on Sunday 25th February so get the date in your diary now!



COFFOLOGY HOPES TO RAISE A 'LATTE' SUPPORT

We are delighted that Coffology, the new coffee vending machine venture of AquAid Northern Ireland, have chosen us as their charity partner. Daniel Rafferty, Coffology Director, says; "We hope to raise vital funds for NICHS's work by making a donation for every coffee machine we sell or rent to customers, as well as donating a percentage of our ingredients sales each month. We will also help spread awareness about the charity by having their logo on both our coffee cups and machines."

We are very thankful to have been chosen as Coffology's charity partner. To find out more about how your business or organisation can partner with us visit nichs.org.uk/fundraiseatwork

Northern Ireland Chest Heart & Stroke

Your legacy of hope and care - a gift in your Will.

A gift in your Will could not only help your loved ones but can leave a legacy of hope for generations to come.

In Northern Ireland four in ten adult deaths are caused by chest, heart and stroke illnesses. We're working hard to change this by funding life-changing research and caring for those who are affected by devastating health conditions every day.

We've been helping local people for over 75 years, and with your help we can continue to be there for people who need us now, as well as those who will need us in the future.

Please visit nichs.org.uk/giftsinwills for further information on leaving a gift in your Will to NICHS or call us on 028 9032 0184.

Preventing, Supporting, Caring and Rebuilding across Northern Ireland.

Chest Heart& Stroke ered with the Charity Commission for Northern Ireland NIC 103593

Impact 2022/2023

THE DIFFERENCE WE MAKE

To help us achieve our vision of a healthy Northern Ireland free from chest, heart and stroke illnesses, it's important that we measure the impact of the work we do. This allows us to see what's really making a difference, helping us to focus our attention on key areas, while improving others, so we can deliver the most effective services and outcomes.

The next few pages highlight the effectiveness of our programmes, services and research projects over the past year. To find out more about our impact you can read our Annual Impact Report which will be available on our website in the coming weeks. Visit nichs.org.uk/about-us/impact to read the report in full.

CARE IMPACT

Over the past year, we've helped almost 3,000 people and their families to adjust to life with a chest, heart or stroke condition, helping them to enjoy life to the full, re-engage with hobbies, and improve their confidence, independence and overall quality of life.



2,588

people supported by our Care Service programmes.

Number of people we supported, with "chest", "heart", & "stroke" as their main condition, and their carers:









CARDIAC SUPPORT

Heart Strong Education Programme

Those who participated in our Heart Strong Education Programme said...

91%

"It made a difference to my health" 91%

"It helped me take better control of my health" 82%

"It helped me take better control of my heart condition"

STROKE SUPPORT

PREP (Post Rehab Exercise Programme)



591 pe

people were referred

By the end of the programme, participants showed improvements in...

MOBILITY TUG TEST (Timed Up and Go is a test of mobility and fall risk)



showed improvements in mobility



Nos who were "independently mobile" doubled (103%)



showed "clinically important" improvements



were "not a fall risk", vs **50%** in week 1



Impact 2022/2023

RESPIRATORY SUPPORT

89%

said our Breathing Better Walking Groups improved their fitness, confidence and overall health.

RESEARCH IMPACT

With your help, we've funded high quality research in local universities and hospitals since 1946. Research is vital in the fight to prevent chest, heart, and stroke conditions.

We have had 20 research projects active during the year, with 2 studies being completed and an additional 5 new studies funded this year.



18

research studies live at the end of the financial year



5

new projects funded this year



£386,192

awarded to new research projects in 2022/23

POLICY AND PUBLIC AFFAIRS IMPACT



We helped set up the Cross-Party Group on Stroke.



We campaigned about Cardiac waiting lists.

We lobbied for improved Heart Failure services.



We lobbied the Government for a new Lung Health Strategy and pressed for the Respiratory Forum to be reconstituted.

We worked to improve awareness and knowledge amongst the public, patients, and professionals around asthma.



We continued to campaign on issues such as tobacco, alcohol, and obesity.

FUNDRAISING IMPACT

Almost 90% of our care and prevention services and research are funded exclusively thanks to public donations.

All of the money we receive stays in Northern Ireland, funding programmes and supporting local people right here in our communities, workplaces, schools, hostels and universities.



£3.26 million raised through public donations



3470 regular givers



200 companies fundraised for us



Over 330

community fundraising events organised across NI



1,145

supporters took part in events and challenges

HEALTH PROMOTION AND PREVENTION IMPACT

We offer targeted services to workplaces, communities and schools to help detect early signs of chest, heart and stroke illness and empower individuals to make healthy choices. 20,913

people across Northern Ireland benefitted from our range of health promotion activities.

HEALTH & HOMELESS SERVICE



374 staff and residents benefitted



hostels supported



205 resources provided



hostel staff trained in AF & BP and Mental Health First Aid

HEALTH PROMOTION IN SCHOOLS



5,891

parents and young people benefitted from our schools programmes. Chester's Challenge Programme

1,212

pupils took part in the Chester's Challenge Programme

57 schools

HEALTH PROMOTION IN THE WORKPLACE



7,943

employees benefitted across 60 workplaces 145

Health Champions trained 60

workplaces supported to develop Action Plans, 100% implemented

WELL CHECKS

Demand for our Well Checks has been overwhelming this year with local people seeking alternatives to visiting their GP to check in on their health. During the year, we provided nearly 6,500 health checks, helping to identify Atrial Fibrillation (AF), a type of irregular heartbeat that increases

your risk of having a stroke, high blood pressure, and other risk factors. With this information, we encouraged recipients to make healthy lifestyle changes, and signposted them to seek professional help.

6,447
people
received
checks

1.1% referred to GP with possible AF 16.4% referred for help with high blood pressure **22.3%** referred for help with high cholesterol





Health

LET'S TALK ABOUT CHOLESTEROL

Lowering our cholesterol levels often springs to mind when we think about our health and things we can do to improve this, but how much do you know about cholesterol? As October is National Cholesterol Month we wanted to highlight some useful information about cholesterol and how you can manage it.

DID YOU KNOW THAT NOT ALL CHOLESTEROL IS 'BAD' FOR OUR HEALTH?

Cholesterol is a natural fatty substance found in your blood and it is essential for healthy functioning of the body. Cholesterol is made in the liver, but we also get cholesterol from the food we eat. It is when we have too much cholesterol in the body, especially the 'bad' types which can cause fatty deposits to build up in the arteries, that problems can occur, and our risk of heart and stroke illnesses increases. This is known as high cholesterol.

'GOOD' VS. 'BAD' CHOLESTEROL

Cholesterol is carried in the blood by proteins and when these combine, they are referred to as lipoproteins. There are two main types of cholesterol or lipoproteins:

- 'Good' cholesterol or High-Density Lipoproteins (HDL) that takes fat away from your artery walls.
- 'Bad' cholesterol or Low-Density Lipoproteins (LDL) sticks to your artery walls and causes a fatty build up.

We therefore want to try to improve our 'good' cholesterol, or HDL, and lower our 'bad' cholesterol levels, or LDL- check out our top tips on how to do this. High cholesterol rarely has any symptoms however, so you can only find out what your levels are if you have a check via a blood test at your GP surgery or at a health check with Northern Ireland Chest Heart & Stroke.

TIPS ON HOW TO REDUCE YOUR CHOLESTEROL



1. Eat a healthy balanced diet - eating foods like oily fish, wholegrain products, nuts, pulses, seeds, fruit and vegetables can help reduce your cholesterol. It is also important to limit foods high in saturated fat such as, bacon, butter, pastries, cakes, buns and fried foods.



2. Reduce your alcohol intake - men and women should limit intake to less than 14 units per week (1 pint of beer = 2.8 units, 35ml of spirits = 1.3 units, 187.5ml of wine = 2.3 units). Also avoid binge drinking - more than 8 units for men, and 6 units for women, in one single sitting.



3. Maintain a healthy weight - being overweight or obese can increase your cholesterol levels due to excess fat in the bloodstream, therefore increasing your risk of a heart attack or stroke.



4. Increase physical activity - 150 minutes of moderate intensity or 75 minutes of vigorous intensity activity can help improve our cholesterol levels. Include 2 sessions of strengthening exercises too.



5. Stop smoking - smoking can increase our cholesterol levels, which increases the risk of heart attack and stroke. To help you quit, use nicotine replacement therapy products alongside a support service.



Familial Hypercholesterolaemia (FH) is an inherited cholesterol related condition which you may not have heard of before. Approximately 25% of people in Northern Ireland have FH however so it is a condition we should all be aware of. In 2014, NICHS funded the first FH service in partnership with the Public Health Agency and Health and Social Care, after years of campaigning to raise awareness of FH and the need for a dedicated service.

Here, Dr Kathryn Ryan, who runs the lipid service in the South Eastern Health and Social Care Trust, does a Q&A with us.

What is Familial Hypercholesterolaemia (FH)?

FH, is an inherited condition which results in extremely high cholesterol levels. People with this condition are at risk of heart disease at a young age and usually have a strong family history of heart attacks or strokes.

How do I know if I have FH?

FH is tricky to detect, however there are two main ways someone with FH is identified.

The first is through cascade screening. This is where direct relatives (such as siblings, children or cousins) of an individual known to have FH, are offered a test to detect the gene which causes FH in that particular family.

The second way is when individuals are tested for a range of genes which can cause FH. This is offered when a person has very high cholesterol along with a family history or personal history of a heart attack or stroke at a young age, and perhaps some of the physical signs described below.

Are there any signs or symptoms of FH?

The unique physical sign of FH is tendon xanthoma. These are lumps of cholesterol which are found over tendons, often at the elbow,

knuckles or on the Achilles tendon. We don't see them very often but when they occur, they help confirm the diagnosis of FH.

Other signs of high cholesterol are xanthelasma and corneal arcus. Xanthelasma are streaks of cholesterol on the eyelids or around the eye. A corneal arcus is a thin white line around the iris or coloured part of the eye. This is normally seen in older people but can be a marker of high cholesterol if it occurs in someone under 50 years of age.

Why do we look for people with FH?

We want to identify people with FH to delay or prevent early heart attacks which are associated with very high cholesterol levels. We do this by offering advice about a healthy lifestyle along with some of the very effective treatments available.

What treatment is available for FH?

There is a long history of successful treatment of FH with statins. These have been shown to reduce cholesterol and prevent or delay heart disease. There are additional cholesterol lowering treatments which are also very useful either along with a statin, or instead of.

If you think you might have FH, you should discuss it with your family doctor. Remember that whatever the cause of the high cholesterol, a healthy lifestyle and medication when required, can be very effective in managing this and reducing the risk of heart disease.

For more information on cholesterol and how you can manage yours, visit nichs.org.uk/cholesterol



Her Heart Fundraising Initiative

HEART-BREAKING

Heart disease is one of the leading causes of death in women, killing nearly twice as many women as breast, cervix, uterus and ovary cancer combined in Northern Ireland. Awareness of women and heart disease remains understudied, underdiagnosed and under-treated however and the majority of women remain oblivious to their risk of heart disease.





1,680 females were admitted to hospital for heart attacks in 2021



4 in 10 heart attack deaths are females



Heart disease kills nearly

twice as many women in NI
as cervix, uterus, ovary and
breast cancer combined



More women died from a heart attack than breast cancer in 2021-22

During and after menopause, a woman's body gradually produces less oestrogen. This increases the risk of the coronary arteries narrowing, and this increases your risk of developing Coronary Heart Disease, or a circulatory condition such as stroke.

Often considered as a 'man's health issue', in recent years research* has revealed that women are dying needlessly from heart attacks, or not making as good a recovery as they could, because they don't receive the same care and treatment as men. Shockingly, a woman is 50% more likely than a man to receive an incorrect initial diagnosis for a heart attack, is less likely than a man to receive a number of potentially life-saving treatments in a timely manner, and following a heart attack, a woman is also less likely to be prescribed medications to help prevent a second heart attack.

The same report also revealed that women having a heart attack delay seeking medical help longer than men because they don't recognise the symptoms. Heart attack symptoms vary from person to person, but often include:

- Pain or discomfort in your chest that happens suddenly and doesn't go away
- Pain that spreads to your left or right arm, or to your neck, jaw, back or stomach
- Feeling sick, sweaty, light-headed or short of breath

As women get older it is increasingly important they are aware of the risk factors that can make them susceptible to developing Coronary Heart Disease. Common risk factors include high blood pressure, high cholesterol, smoking, diabetes, being overweight and not exercising enough.

Cathy McMullan, a Civil Servant from Bangor, suffered what doctors believe to be a silent heart attack. She recalls; "I'd had a health check at work from NICHS and there were lots of red warning lights, including my blood pressure. I was a little overweight at the time, not getting enough exercise and relaxing with a drink most evenings."

After her health check, Cathy resolved to make positive changes to her life, and she did, losing one and a half stone (9.52 KG). When NICHS's Well You team returned after 12 weeks for a follow-up health check, Cathy was pleased to find she had greatly improved in many areas – but strangely her blood pressure had actually gone up.

"The top figure (systolic) was high but the bottom figure (diastolic) was off the scale!" Cathy continues; "It made no sense and it concerned me. It bothered me so much that I went to the open surgery at my GP's the next day. I had an ECG, but instead of being told I was fine, I was kept there. The GP was called back in and started asking what I would call heart attack type questions. I hadn't experienced any noticeable symptoms such as chest pains; maybe a little indigestion but nothing noteworthy. However, the ECG results were indicating that I'd had a heart attack in the previous few weeks."

Cathy was immediately put on medication and in hospital follow-up tests showed she had a slightly leaky heart valve. She says; "The doctors can't conclusively say whether I did or did not have a heart attack, but the leaky valve indicates that this is a possibility as that damage can be caused by a heart attack."

"My message to everyone is to get checked. Know your blood pressure and your cholesterol. A doctor would not have picked me out as a likely candidate for a heart attack and yet look what happened. If it hadn't been for NICHS and having that health check, I might never have known. Thanks to them now, most importantly, doctors will continue to monitor my heart with regular echocardiograms in the future. Get checked!"



*Bias and Biology: How the Gender Gap in Heart Disease is Costing Women's Lives, British Heart Foundation 2021 The danger heart disease poses to women is why we are launching our 'Her Heart' initiative. We want to raise awareness of the prevalence of heart disease in women and promote prevention and selfcare. Women in recovery from stoke, TIAs and heart attacks have a longer and less successful recovery journey from these illnesses due to often prioritising others' needs before their own.

Help us protect the lives and good health of our mums, grandmothers, sisters, aunts, nieces, daughters, cousins and friends by showing heart for all women this autumn. There are so many easy ways to get involved:

You could:

- Go Red! Create your own fundraiser filled with fun activities
- Sign up to take part in our Facebook Challenges the Her Heart 5K or Dare A Hearty Dip
- Enjoy a Heartfelt High Tea
- Business owners could you support us by asking customers for an optional £2 donation at your till?

We want to see a Northern Ireland where the heartbreak of losing a loved one to heart disease too soon is in our past, not our future.



To find out more and get involved visit nichs.org.uk/herheart





STROKE REFORM

NICHS continue to take every opportunity to urge Assembly Members and the Department of Health to make stroke reform a greater priority. The Department published a Stroke Action Plan last year but sadly there has been very limited progress.

With the support of the Cross-Party Group at Stormont we wrote to the Permanent Secretary again, pointing out that stroke survivors are living with much greater degrees of disability than would have been the case had reform of services been carried out. The reply received was disappointing, essentially saying we can expect limited progress on thrombectomy in the short term and no progress on wider reform e.g. on creating Hyper Acute Stroke Units, for the foreseeable future. We followed this up with a meeting of the Cross-Party Group, addressed by leading Department of Health officials, who reiterated that there will be little progress this year.

We obviously expressed our extreme disappointment about the situation and will continue to make the case for planned change rather than the chaotic collapse of services, such as what happened to stroke services in Daisy Hill Hospital recently.

ASTHMA RESOURCES AND RESPIRATORY MANIFESTO

We have been working with respiratory clinicians to provide a range of resources to improve asthma awareness. In addition to our asthma awareness campaign, which has been running over the summer months, we recently hosted an online session for pharmacists and will use elements of this for an online resource.

By Autumn, we hope to have finalised an online course aimed at secondary school children and young people. Our aim is to address the low level of understanding about inhaler technique and compliance amongst both patients and health professionals.

VAPING AND SMOKING

We have updated our position on vaping and recommend, due to the increasing concerns about the impact on cardiac and respiratory health, that vapes should only be used by existing smokers as a short-term measure to assist them in breaking their addiction. Specifically, vapes should only be used over a 12-week period as part of the recognised behavioural change programme.

Largely, we concur with the views of the 4 Chief Medical Officers of the UK, summed up the following remark by Professor Sir Chris Whitty, CMO for England: "The key points about vaping can be easily summarised. If you smoke, vaping is much safer; if you don't smoke, don't vape; marketing vapes to children is utterly unacceptable."

We welcome recent government moves to explore restricting the advertising of vapes to under 18s. We believe however, in light of the known dangers of tobacco and the increasing concerns about vapes, the minimum age of purchase for tobacco and for vapes containing nicotine should be raised to 21. This would be a significant boost in the move towards a smoke free society and would also provide leadership for schools seeking to stop the spread of vaping amongst their pupils.

We will be working with Assembly Members and others to seek support for this position with the aim of seeking legislative change as soon as possible.



ALWAYS IN OUR HEARTS

When someone has died their life may have ended, but the love and memories we have can continue to be shared so that they will live on in our hearts forever. When we remember someone, they are always with us.

We understand that every loss is very personal, and everyone finds their own way to cope with that experience. Often though, people can find comfort by doing something meaningful that honours the memory of the person they have lost, and this is what creating an 'Always In My Heart' online tribute on our website is all about.

This is a personalised special place of remembrance where family and friends can add and share their photos, videos, and stories, creating a wonderful online memory box of time spent with their loved one. It can help them to easily keep in touch and support one another through the grieving process, and going forward, share information about special anniversaries or any other important family occasions. It may also help bring comfort by someone sharing a previously unseen photo, or the family reading a wonderful story about their loved one written by a friend for the very first time.

User friendly and easily accessible on a PC, tablet or mobile phone, content can be uploaded easily, and there is absolutely no cost at all to set it up. Privacy settings can be adjusted to give the family full control of who sees the content. It belongs to you to use for as long as you want, remaining online permanently or for a specific period of time, allowing the memories of a loved one to live on longer for future generations such as grandchildren to access.

Whilst there is no expectation of fundraising, or making a donation in memory, if you do choose to do so, you will be ensuring your loved one's impact is never forgotten. By raising vital funds for us, you will be helping save local lives, and make an amazing difference to the care that we are able to provide to people living with chest, heart and stroke conditions in our communities and increasing the support we can give to their families.

To find out more about setting up a free online tribute in memory, please contact us on 028 9032 0184 or inmemory@nichs.org.uk

Setting up an online tribute with us is free, easy, and only takes a few minutes:

- Visit our website, nichs.org.uk, and search 'tribute page'
- Select 'Donate In Memory'
- Select 'Create A Tribute Page'
- Select 'Create A Tribute'
- Upload photos, videos and memories
- Share the link with family and friends





Work Well Live Well

BUILDING HEALTHIER AND HAPPIER WORKPLACES

Work Well Live Well is a free workplace health and wellbeing support programme delivered by NICHS and funded by the Public Health Agency (PHA).

The aim of Work Well Live Well is to help local workplaces to improve the health and wellbeing of their employees through personalised support. The programme supports participants in carrying out a health and wellbeing survey within their workplace, in analysing the results to determine health priorities and to subsequently develop a bespoke, 3-year action plan for their team.

BENEFITS OF TAKING PART IN WORK WELL LIVE WELL

- Delivery of Health Champion training for employees
- Access to three NICHS Well Talks or Webinars
- Provision of advanced workplace health training including Mental Health First Aid
- Support with signing up to and implementing the Equality Commission's Mental Health Charter
- Ongoing support from our experienced Workplace Health and Wellbeing team

WORK WELL LIVE WELL IN PRACTICE

Marcon Fit-Out: "So far, we have delivered initiatives including Fruit Bowl Mondays, health talks and assessments. We have installed defibrillators in our offices and workshop, and on the majority of our sites. The programme has encouraged employees to get active and staff have taken part in charity events, including a skipping challenge and the Belfast Marathon."



MJM Marine: "To date we have delivered a healthy breakfast event with a nutritional speaker, Well Talks from NICHS, provided healthy options in our vending machine and free fruit on a fortnightly basis, distributed company branded water bottles and provided MOT Health Checks for staff through NICHS."



Xperience: "Some of the wellbeing initiatives we have implemented include increasing our annual leave entitlement, introducing an extra day for 'birthday leave', implementing a hybrid working policy, providing annual flu vaccinations, celebrating national awareness campaigns such as Mental Health Awareness Week and Menopause Awareness Day, providing one to one financial advice sessions for staff and refurbishing our offices to encourage collaborative working and dedicated break spaces."



To find out more about Work Well Live Well, or to register your workplace, visit nichs.org.uk/workwelllivewell

Care Services

A SPOTLIGHT ON OUR FAMILY SUPPORT SERVICE

Navigating life after a chest, heart or stroke condition diagnosis, or after a hospital stay related to such a condition, can understandably be daunting. People may be fearful of what the future holds, have questions about how best they can manage their condition, amongst many other concerns. Our Care Services team is here to help with our Family Support Service.

Our team of experienced Family Support Coordinators support people affected by chest, heart and stroke conditions and their families. This support is both practical and emotional and the aim of this service is to help people better understand their condition and to overcome any barriers they may be facing.

Our Family Support Service involves an initial home visit, so our Coordinators can understand individual circumstances and experiences, allowing them to develop a tailor-made support plan to best suit each person's specific needs.

The support offered by our Family Support Service includes:

- Information and advice on living life with a chest, heart or stroke condition, as well as caring for someone with such a condition
- Details about local NICHS programmes including physical activity programmes, education programmes, walking groups and Wellness Sessions
- A listening ear and emotional support
- Signposting to other local services
- Fast-track referral to Advice Space for support with benefits. Since March 2020, the amount of financial help Advice Space has assisted NICHS service users claim stands at an amazing £1,108,018
- Support in liaising with healthcare professionals

TERRY AND DOT'S STORY

Husband and wife, Terry and Dot Blakely from Bangor, were helped by our Family Support Service after Terry suffered 13 heart attacks over 3 days. Here they share their experiences of using the service.

Terry says; "When I came out of hospital, I was doing rehab and NICHS contacted me. I attended their Zoom information sessions which gave me a good insight into the benefits of exercise and I then started attending one of their walking groups. I actually volunteer with the walking group now."

Dot explains; "The best thing that came out of this awful time was when the NICHS team got in touch with Terry. That changed an awful lot of things and gave us our life back again. We were scared to go out much and so on because of Terry's stents and we just didn't understand the whole concept of it."



Terry and Dot's Family Support Coordinator, Maeve, says; "It's great for me to see the progress a client, like Terry, makes from the initial home visit to going through our services and maybe becoming an NICHS volunteer, or returning to work etc. Everybody is welcome in our NICHS family so please don't hesitate to contact us if you have been affected by a chest, heart or stroke condition."

To find out more about our care support services visit nichs.org.uk/getsupport or call us on 028 9032 0184.





Clodagh Dunlop STROKE

Clodagh Dunlop, from Magherafelt, suffered a major stroke 8 years ago at the age of just 35. Clodagh's life changed overnight as her stroke resulted in Locked-in Syndrome and here she shares her inspirational story.

"I had been unwell and believed I was having a stroke. I went to a local hospital and as I was waiting in A&E I had a brainstem stroke. I was transferred to the Royal Victoria Hospital in Belfast where I had surgery and a massive blood clot removed from my brainstem. I was given a 50/50 chance of survival."

"When I woke up in the Intensive Care Unit after my surgery it was a terrifying experience. I couldn't move a muscle but inside my head I was screaming 'I'm here!' I was a prisoner in my own body."



"For almost 3 months I was unable to move or speak. I could only communicate by blinking, but my mind remained completely alert. Eventually I started to show some signs of recovery and was transferred to the Brain Injury Unit at Musgrave Park Hospital, Belfast where I had to learn to breathe, swallow, walk and talk again." "On discharge from hospital, I completed NICHS's Post Rehab Exercise Programme (PREP). I spent a long time in hospital and, like many people who suffer a significant stroke, when I was discharged the services came to an abrupt stop. This had a real impact on my mental health and wellbeing, particularly as a young stroke survivor. There was a real void in aftercare - but into that void came NICHS and PREP."

"PREP gave me the opportunity to meet other stroke survivors. I was with people who understood my feelings because we had shared experiences. I was able to talk to people openly and honestly. Stroke survivors would say, 'This is difficult, but you can go on to thrive and live a full life.' That was what I needed to hear for my wellbeing."

"NICHS may not realise how important PREP was to me, but the group was a turning point in my wellbeing post-stroke. Stroke will always be a part of my life; I have made a good recovery but do have disabilities from my stroke. I am back at work full-time. It pains me that other stroke survivors are still going through what I experienced, in that services stop abruptly on discharge from hospital. The impact of this should not be underestimated."

"I know how vital PREP is and as a stroke survivor I want to help make sure there are funds available for NICHS to continue to deliver their vital services. That is why I have been volunteering as a NICHS Community Ambassador for the past 5 years. It is a way to give back to my community and say thank you for what the charity has done for me. I want to raise awareness and hopefully, in turn, money so NICHS can continue to help as many people as possible."

Please help us continue to support people like Clodagh when they need it most. Visit nichs.org.uk/regulardonation to find out more about making a regular donation and the many ways that it could help.



A monthly gift can make a life-changing difference...

Regular gifts will ensure people across Northern Ireland get the support they need to return to living life to the fullest, after a stroke, respiratory or heart illness.

A monthly gift of:

£5

will help pay for life-changing support from a special neuro physiotherapist

£10

will help pay for a home visit after a heart attack, stroke or following a respiratory diagnosis

£20

will help fund a researcher working to prevent and treat chest, heart & stroke illnesses

Our support and rehab services rely almost exclusively on public donations.

Scan the QR code, or visit our website for more information: www.nichs.org.uk/regulardonation







Almost 90%

of our care and prevention services and research are funded exclusively by public donations.

Find out how you can support NICHS at www.nichs.org.uk



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