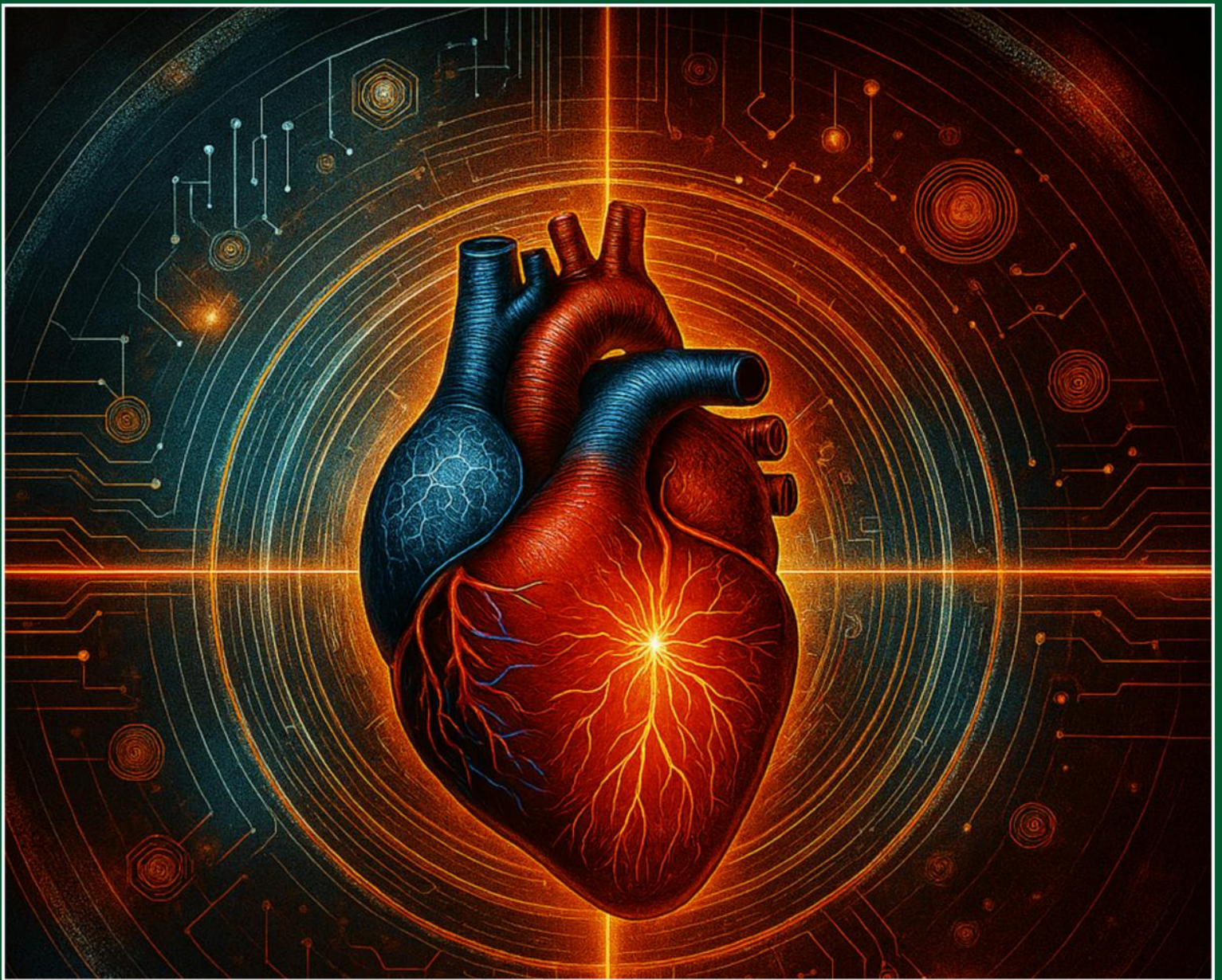


LIFE IN HEARTS

ISSUE 11
OCTOBER /
NOVEMBER /
DECEMBER
2025



CANADIAN WOMEN WITH MEDICAL HEART ISSUES
LIVING BRAVELY. LOVING BOLDLY.

Life In Hearts

www.LifeInHearts.ca • LifeInHearts@HeartLife.ca • @LifeInHearts
Canadian Women With Medical Heart Issues Facebook Support Community



EDITOR &
FOUNDER
Jackie Ratz, MB
Heart Failure, 2017

J.R. comments:

I am not sure how others feel but summer was a rollercoaster this year ... from the anticipation of it coming, to the intense heat and the overwhelming smoke that blanketed so much of Canada at various times... it made it feel like a very short summer season.

Personally, my family of 6 were some of the thousands who had to cancel travel plans due to the Air Canada strike that occurred mid August... I won't lie, the disappointment and frustration of the situation was a challenge to process. Like our heart medical journeys sometimes things occur beyond our control - it is in these times that deep breaths, calm and advocacy come into play. Hardest was the sadness I saw in my niece and nephew eyes ... we are re-planning for June 2026.

Onwards and upwards, we are going into a busy time for family, conferences and other projects ...

I really do love fall, the change of seasons, the crisp air and of pumpkin everything... I hope it is an extended season this year before winter settles in. Always remember to Live Bravely. Love Boldly. Every day.

LIFE IN HEARTS TEAM



Rachel Charron, ON



Louise Koch, AB

CANADIAN WOMEN WITH MEDICAL HEART ISSUES TEAM



Jeanette Smith, ON



Charlotte Girard, QC



Lorraine Stratkotter, AB

PROUDLY AFFILIATED WITH:



HeartLife Foundation
heartlife.ca



Canadian Women's Heart
Health Alliance
cwhha.ca / wearredcanada.ca



Global Heart Hub
globalhearthub.org

Cover Photo Credit: Artificial Intelligence image.

This image is an interpretive representation of the potential power of AI and the future of heart care.



Issue 11

October • November • December

CONTENTS

04 JACKIE RATZ, MB

From HF to Living My Best Unimagined Life

HEART JOURNEY SHARE

Women with lived experience (WWLE) share their journey with Cardiovascular disease

08 MARC BAINS, BC

HeartLife Foundation: A New Era in Patient Advocacy for Heart Health

PATIENT ORGANIZATION SPOTLIGHT

Highlighting organizations with a mission to improve, support and educate patients.

11 RETAIL THERAPY

- Life In Hearts Calendar
- Custom 'Live Bravely Love Boldly' bag
- "Stroke of Luck" by Bruce Hughes

Products available to help us live better or products that make us feel good or support a cause that is close to our hearts.

12 RISA MALLORY, ON

Living with Heart Disease in the Age of Artificial Intelligence

TIPS & STRATEGIES

Articles on ways to make living with cardiovascular disease a little easier.

17 JENNIFER MONAGHAN, BC

The Power of Presence: Why Patients Belong at Cardiovascular Conferences

LEARNINGS & OPPORTUNITIES

Articles highlighting engagement, new learning or information.

22 AUBYN BAKER, ON

Living in Limbo Land Until You Are Not...

MENTAL HEALTH LIGHTHOUSE

Support & learning for our mental health from WWLE or guest writers.

24 JACKIE RATZ, MB

When Life is Not Fair

REFLECTIONS

Inspiration through words, art, pictures or other.

25 CHERYL STRACHAN, AB

8 Heart-Healthy Comfort Foods for the Chill

EATING FOR HEART HEALTH

Love good food? Tips to eating well, and an easy recipe are featured.

31 ANNIE SMITH, ON

Creating a Sustainable Life

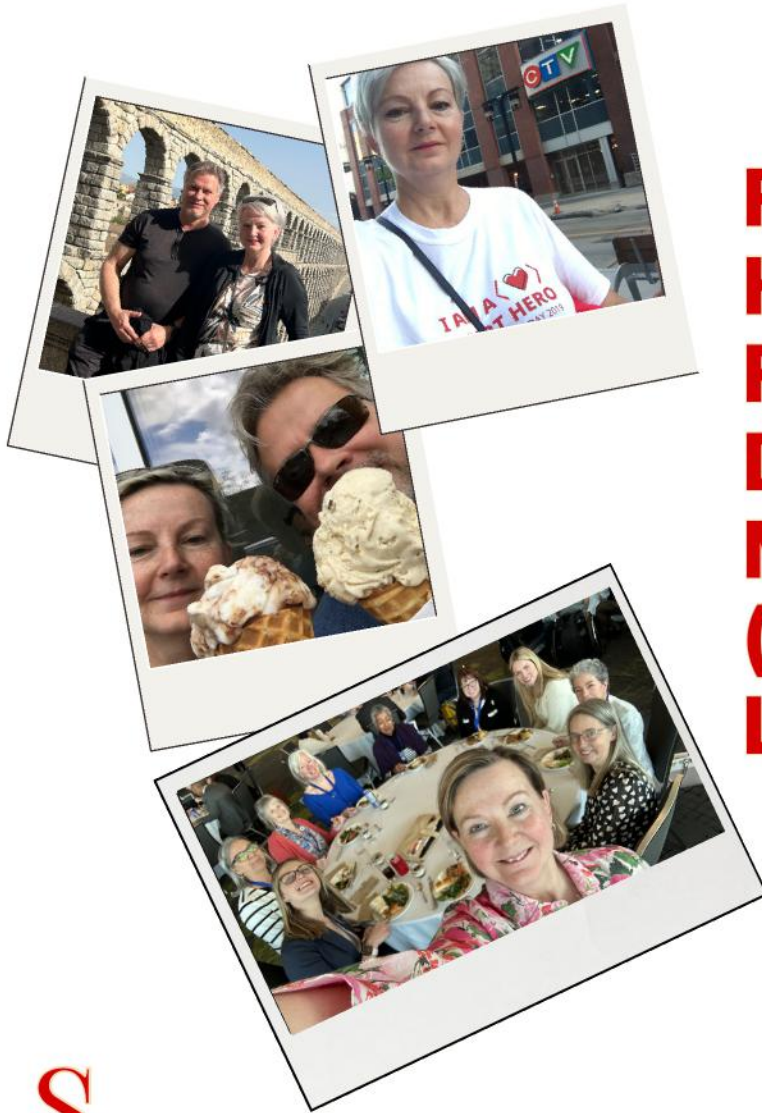
FITNESS FOR EVERY 'BODY'

All about fitness, meditation & movement.

32 REMEMBRANCE DAY COLOURING

ACTIVITY CORNER

Various activities to stimulate your brain!



FROM A HEART FAILURE DIAGNOSIS TO MY BEST (UNIMAGINED) LIFE

By
JACKIE RATZ, She/Her
Manitoba
Heart Failure, 2017

Some of you reading this will likely be familiar with my heart story. I have been around the block now for 9 years with heart failure. I lived with heart disease prior to that.

In order to share my heart journey, I first have to go back to when I was in my 20s and just at the start of figuring out what life was all about.

I was never a great school student, average at best but I worked hard in things I enjoyed or that could get me ahead. I started working at 12 (Saturdays under the table for a family friends restaurant) and had a very successful babysitting business from 12 to 16.

I share this as I never considered myself driven or highly motivated but as I look back, I can now see that my small “A” type personality was shining back then too. LOL

I went on to be the first woman computer sales person and then graduated from college and eventually university.

It was when I was in my second year of university, working full time and trying to open a restaurant (plus in an unhealthy relationship) that I was diagnosed with Non-Hodgkins Lymphoma - stage 3. I was 23 and given a 40% chance of survival. Life abruptly stopped.



One of the few pictures from my cancer journey - half way through treatment

I was in ICU for a week. Now I should pause and say that I had been misdiagnosed for 9 months before a simple Xray revealed the mass growing in my chest. My family doctor kept saying bronchitis, walking pneumonia ... meanwhile I was losing weight quickly, constantly tired and sleeping upright because my coughing was relentless when I layed down. It was a walk-in doctor (my family doctor was on vacation) who finally sent me for an X-ray. He sent me for an emergency CT scan the next day.

After the CT scan, while I was getting dressed to leave, the doctor came to find me to ask where I was going... I never left the hospital. I was supposed to be going to see Forest Gump that evening with friends - This day is burned into my memory, the shock, the fear, the relief...the immediate resolve.

"For 9 months I was misdiagnosed. I wondered afterwards if my age contributed ..."

Right after I was checked into the hospital I was taken by ambulance for emergency radiation at a different hospital. The radiologist did not hid his concern or the seriousness on how he was going to radiate my chest when I could not lie down as I would cough relentlessly.

I was 23, sitting on a stainless steel table, in a cold room, exposed for the world while he marked me and then told me to sit as still as a statue. If I moved he would hit my heart. The tumour was putting pressure on 25% of my heart and was the size of a medium orange and small lemon.

The hight light came after when the ambulance went through the McDonalds drive-thru to get me an ice cream. Honestly it is still the best ice cream I have ever had. The kindness shown me at that moment has never left me. Small moments, small joys made the process bearable.

Treatment determination came after the biopsy. For the biopsy, I was kept at a 45 degree angle and

only local freezing could be used as my blood pressure was too unstable and my heart rate was 130 resting. I asked to be kept informed and joked when he reached my ribs, that I would like them by sweet and sour sauce!

Accepting treatment meant I had to accept losing my fertility (no egg harvesting available to me at that time - plus I was too sick). The treatment was going to be aggressive as the cell type was the toughest of the possibilities - 9 months of Chemotherapy and 30 days of daily radiation followed.

This was now basically 2 years into my cancer journey. I continued working part time and taking university courses... I had to keep feeling normal when so much was not.



Life continues even during cancer treatment- BFF gets married

Fast forward and life ticked along... Graduated from university... a remission diagnosis came at 5 years and was told I was cured at 8 years, took on a career in fashion as a buyer. Got married, became an aunt and fur mom. And then 20 years on it all changed.

At age 44 I experienced a heart event at home... but it really felt more like a flu bug. It was the unrelating fatigue that sent me to the doctors. I was told it could not be my heart. After a hard press by me, she reluctantly agreed to an ekg but only to placate my mom (mom made me promise not to leave without an ekg or x-ray).

Doctor called me 2 days later and told me I had an abnormal EKG. She apologized and told me she had already made me an appointment with a cardiologist in about 6 weeks.

I was followed with various tests for 8 years following my cancer treatments but was never told about the risk to my heart, kidneys was going to be for life... in all fairness they did not know... the research is pretty recent.

Seeing my second cardiologist about 6 months after the first (that is a different story), he looked at me and said "Hi, I am Dr J, nice to meet you - you are right on time." I was a little stunned. More pills, more tests and a "Chemotherapy Induced Cardiomyopathy" diagnosis. My life saving chemo from 20 plus years ago had left me a legacy.

While receiving the heart disease diagnosis was difficult, it helped explain various heart blips and pains I had for years - these were discussed at appointments but



Crt-D Implantation 2017

quickly dismissed when I mentioned them over the years.

My journey with heart disease was short lived, I slipped into heart failure at age 47. I thought I was doing well, was feeling good... that follow up appointment is another burned into my memory moments in life... I can still picture what Dr J was wearing, how sunny and warm the day was, how good my coffee tasted... and then those words "You are in heart failure. Your heart function has dropped from 40% to 25%." I was alone as I told hubby it was a regular follow up no need to be there. I was shocked... blindsided. My body had failed me again.

With the quick drop in my EF, the heart function clinic quickly scheduled me for emergency CRT-D surgery.



Recognized by Manitoba MLA for volunteer work for Women's Heart (2019)

As all this was happening I was wondering what this was gonna mean for my career, my love of travel, all future plans... My husband and I both had very fulfilling and successful careers.

I tried to maintain my life as is. Fighting every day to meet my career and personal responsibilities... but I was failing. For the second time in my life I had consider I was not in control, my body was. I was exhausted all the time, the brain fog meant I was making errors or forgetting important priorities at work and home. I was so lost. I decided to start a Facebook group to find support from other Canadian women - I knew if I was feeling frustrated, overwhelmed and sad there had to be others.



Finding my stride 2018



The nightly ritual - 11pm pills

The group became a life line for me. I also told my Heart Failure Cardiologist Dr Z that I was open to supporting her or other local women... I was slowly figuring out how to live with Heart Failure. I also stumbled onto HeartLife foundation, Heart & Stroke and at the time the newly formed Canadian Women's Heart Health Alliance and got involved with all three.

My 50th year around the sun was huge... I went on long term disability from a career I loved but could no longer sustain. With this huge change in my life, I saw an opportunity to step up caregiving to my aging parents - honestly, I see this as the greatest gift that heart failure ended up giving me ... it afforded me time to be with them in ways I would not have been able too otherwise.

I am at year 9 of living well with Heart Failure. My EF has improved slightly. I am on more pills, on my 2nd CRT-D but struggle with continuously less physical energy.

In the 7 years I have been on long term disability, life has changed a lot... My parents have both since passed away, both in 2023 but I know I was there for them ... I was able to support them, care for them to a level that would not have been possible if I was "healthy." I also have a supportive husband who encouraged me to be there for them. I miss them terribly but have no regrets - a blessing many don't get to have.

And I have to mention the incredible people I have met throughout heart advocacy who keep me inspired and motivated to continue to advocate for better care and more supports for women in Canada.

How crazy is it that a diagnosis of Heart Failure would give me a life that was both incredibly satisfying professionally and personally? I am living a life I could not have imagined a decade ago ... but I am happy and grateful to find myself here - Living Bravely & Loving Boldly every day.





By MARC BAINS, Co-Founder,
Vancouver, British Columbia
Transplant, 2018



By JILLIANNE CODE, Co-Founder,
Victoria, British Columbia
Transplant, 2014 & 2018

HEARTLIFE FOUNDATION: A NEW ERA IN PATIENT ADVOCACY FOR HEART HEALTH

Our Mission

HeartLife Foundation (HeartLife) is a patient-driven organization dedicated to improving the lives of people living with cardiovascular disease. We empower patients and caregivers through education, advocacy, research, and peer support. Our mission is to ensure every person affected by heart disease receives timely diagnosis, evidence-based treatment, and ongoing support to live a full and healthy life. We work to eliminate barriers to care, raise national awareness, and influence policies that place patients at the center of the health system.

Our Refresh and Expansion

HeartLife began as a national voice for Canadians living with heart failure. Today, we represent all cardiovascular diseases, reflecting the true scope of the patient journey. Our work now spans heart failure, coronary artery disease, arrhythmias, congenital heart disease, cardiomyopathy, valvular disease, atrial fibrillation, hypertension, amyloidosis, and lipid disorders such as elevated lipoprotein(a). This shift recognizes the interconnected nature of heart, kidney, metabolic, and vascular conditions and allows us to reach a far wider

community. We are also expanding across borders. HeartLife is laying the groundwork to bring our patient led model to the United States, offering advocacy and support to communities that share the same urgent need for education, access, and innovation.



Teaching, presenting and sharing to improve patient care.

Women's Cardiovascular Health

Heart disease remains the leading killer of women, yet symptoms are often overlooked or misdiagnosed. HeartLife is partnering with Jackie, founder of Canadian Women with Medical Heart Issues, to build a comprehensive women's strategy for our Organization.. Jackie brings deep expertise and lived experience to the development of HeartLife Women's programs. Together, we will create a national framework to raise awareness of sex specific risks, drive research that reflects women's experiences, and provide spaces where women can share their stories, access resources, and receive peer support. This partnership ensures that women's voices and needs shape every aspect of HeartLife's work.

HeartLife Academy

Education drives empowerment. HeartLife Academy is our digital learning platform built for patients, caregivers, and health professionals. The Academy delivers clear, accessible courses on dyslipidemia, lipoprotein(a), hypertrophic cardiomyopathy, cardio-renal metabolic health, and other key topics. Each course is designed to help people understand their condition, navigate treatment options, and take an active role in their care. We continue to expand the Academy with new interactive tools, patient stories, and clinical updates to support lifelong learning.



HeartLife invited to Parliament Hill (Ottawa, 2024)

Resources for Every Community

HeartLife recently launched a new online resource page to provide patients and families with easy access to trusted information. The page hosts patient guides, toolkits, and educational materials covering diagnosis, treatment options, lifestyle management, and peer support programs. To reach every community, all core materials have been translated into multiple languages, including French, Punjabi, Farsi, Mandarin, and Spanish. This ensures newcomers, Indigenous communities, and diverse cultural groups can find information in the language they understand best, breaking down barriers to care and connection.



Clinical and patient experts share knowledge for the HeartLife Academy



Influencing change and opening doors for patients.
Heart Failure Update 2025.

Advancing Research

HeartLife is not only a patient organization; we are research leaders. We co-lead the Canadian Heart Function Alliance (CHF Alliance), a national network of over 200 researchers and 80 patient partners working to improve diagnosis, treatment, and long-term outcomes. We support original research by our community. Jillianne, our resident researcher, has recently published a paper in 2025 that adds important findings to the cardiovascular literature on patient engagement in research. We embed patients in every stage of research to ensure new therapies, clinical trials, and policy changes

reflect real-world needs. Our work with the CHF Alliance positions HeartLife as a trusted partner in shaping the future of cardiovascular health in Canada and beyond.

Community Support and Connection

Living with cardiovascular disease can be isolating. Jenny leads our Community Engagement efforts, including peer-to-peer support groups and regular Zoom meet ups where patients and caregivers connect, share experiences, and build resilience. These gatherings provide a trusted space for honest conversation and practical advice, whether someone is newly diagnosed or managing their condition long term. Our national network of patient leaders ensures that no one has to face heart disease alone.

Looking Ahead

HeartLife is entering a new chapter of growth. From expanding into the United States to strengthening our women's health programs, launching multilingual resources, and shaping national research priorities, we remain grounded in our mission: to give every person with cardiovascular disease the knowledge, support, and voice they deserve



To learn more about HeartLife:



- Academy and Resources
- Nation Framework
- Community and On-Line Supports
- HeartLife Foundation General

Find us on:



HEART RETAIL & THERAPY PRODUCTS



There are so many great products available to help us live better and products that make us feel good or support a cause that is close to our hearts...

1



LIFE IN HEARTS 2026 CALENDAR

LifeInHearts.ca



5th Edition Life In Hearts Calendar!

A fundraiser for Canadian Women with Medical Heart Issues FB Community. 2026 calendar of heart pictures submitted by women living with heart disease or heart failure. Created by Jackie Ratz with support from HeartLife Canada.

2

LIVE BRAVELY - LOVE BOLDLY BAG

LifeInHearts.ca

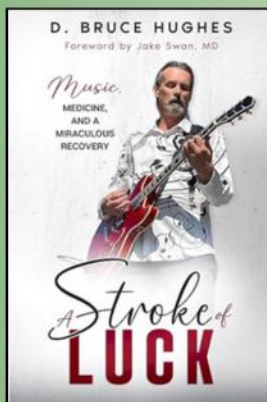


Very Limited Edition!

A personalized tote bag with YOUR initials... statement bag to carry all your essentials for going to medical appointments, the gym or to use for shopping. Created by Jackie Ratz with support from HeartLife Canada.



3



“STOKE OF LUCK?”

By: Bruce Hughes | April 15 2025

[Amazon Link](#)

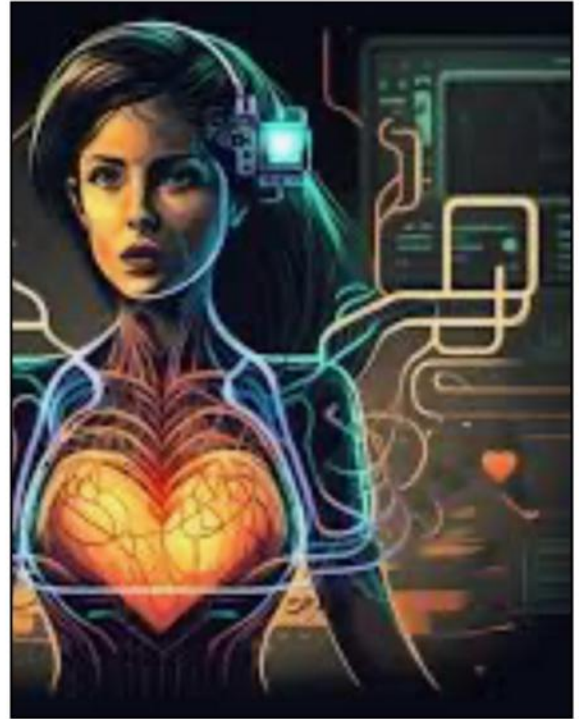


In this inspirational memoir, Bruce shares the gripping tale of his miraculous stroke recovery. From his darkest moments to triumphs both big and small, Bruce's ability to find laughter even in the face of adversity played a crucial role in his healing. His story will bring you to tears one minute and have you laughing the next, as he recounts the raw and often humorous realities of recovery.





LIVING WITH HEART DISEASE IN THE AGE OF ARTIFICIAL INTELLIGENCE: WHAT WOMEN NEED TO KNOW



By
RISA MALLORY, Ontario
Spontaneous Coronary Artery Dissection (SCAD), 2018

When I was first diagnosed with cardiovascular disease (CVD), I felt overwhelmed by the number of decisions I had to make and how much I didn't know. It wasn't just about medications or procedures—it was also about understanding my risk, advocating for myself, and navigating a system that often doesn't reflect the realities of women's heart health.

Now, as Artificial Intelligence (AI) becomes more common in healthcare, I see another layer of complexity—but also opportunity. As someone living with heart disease, I've been learning more about AI, and I believe it's crucial that we, as women with CVD, understand how it could affect our care and our voices in the system.

Here's what I've learned and what I think is important for all of us to know.

1. What Is AI, Really?

AI refers to computer systems that can learn from data, recognize patterns, and make decisions—somewhat like how humans think, but with the speed and capacity of a machine. In healthcare, AI is being used in many ways: predicting heart attacks, analyzing ECGs, suggesting treatments, helping with diagnostics, even reviewing scans for signs of disease.

But AI doesn't think or feel. It works based on data it's trained on—and that's where things can get tricky for us as women.



2. Why Women Need to Be Seen and Counted

Historically, heart disease in women has been under-researched and under-recognized. Many of us have experienced being misdiagnosed or having our symptoms dismissed. AI models are trained using large amounts of health data, but if that data is mostly from men, or doesn't capture women's unique symptoms and experiences, the AI might not "see" us accurately.

For example, women may experience different symptoms during a heart attack—like fatigue, nausea, or jaw pain—while AI systems trained on male-dominated data may be better at spotting the classic "chest pain" profile. This could lead to misdiagnosis or missed diagnosis in women.

So one key thing we need to demand is equity in data. Our data matters. Our experiences matter. And we need to be part of conversations that ensure AI tools are designed to recognize and respond to the diversity of women's cardiovascular health.



3. AI Can Be a Powerful Ally ... If Used Responsibly



Despite the risks, I do believe AI has the potential to help women like us. It can support earlier diagnosis, personalize care plans, and even uncover risk factors we may not have been aware of. For example, AI can analyze patterns in blood pressure, cholesterol, lifestyle, and genetics to help identify who's most at risk of heart disease—even before symptoms appear.

It can also reduce the burden on overworked health systems, possibly leading to shorter wait times, quicker test results, and more consistent care. In rural or underserved areas, AI-powered tools might allow people to get care they otherwise couldn't access.

But this all depends on how AI is developed, implemented, and governed. That means we need transparency: who built the system, what data it uses, how decisions are made, and whether there's human oversight.

4. Patient Data, Privacy, and Trust

Many of us have shared our health data in hospitals, research studies, or even fitness trackers. AI thrives on data—but we have a right to know how our data is being used, and by whom.

Privacy is a real concern. Will our data be anonymized? Can it be sold or used for purposes we didn't consent to? We need to be able to say yes or no to how our data is used in AI research, and feel confident that our identities and health information are protected.

More importantly, trust is built when patients are partners—not just subjects. Women living with CVD must be part of shaping how AI is used. That includes participating in patient advisory boards, research discussions, and hospital committees that explore digital health innovations.

5. What Can We Do as Women with Lived Experience?



Here are a few ways we can stay engaged and informed:



- Ask questions during appointments. If an AI tool or digital system is involved in your care, ask how it works and how decisions are made.
- Get involved in advocacy. National organizations with a focus on women's heart health, like the Canadian Women's Heart Health Alliance, HeartLife Canada, and Heart & Stroke Canada are often looking for patient voices.
- Support inclusive research. Join patient registries or studies that focus on sex-specific data in cardiovascular disease.
- Promote digital literacy. Not everyone is tech-savvy. We should advocate for clear communication and accessible tools that respect different levels of digital comfort.
- Speak up. If you feel something's missing in your care or if you believe AI has been applied inappropriately, raise your concerns.

6. Optimism but with Eyes Wide Open

AI is here to stay, and it may bring some much-needed improvements to heart care. But like any tool, its impact depends on how it's used—and who's included.

We don't need to be data scientists to be part of this conversation. We just need to speak from our experience, ask for transparency, and demand that technology serve all of us.

You are not alone. And your experience matters more than any algorithm ever will.





The Power of Presence:

Why Cardiovascular Patients Belong at Cardiovascular Conferences



By

JENNIFER MONAGHAN,

British Columbia

Stroke & Cardiomyopathy, 2013

Heart Failure, 2019

Heart Transplant, October 2025

After I suffered a stroke and was diagnosed with idiopathic cardiomyopathy thirteen years ago, I turned to volunteering as a way to move forward and make sense of what had happened to me. I was invited to speak at various meetings, workshops and conferences and these opportunities inspired me to do more. I learned about new treatments and discussed them with my healthcare team and was prescribed the new medications. I met amazing healthcare professionals and was invited to join research teams, organizations and policy making efforts. I was able to ask questions of expert presenters and push my patient engagement agenda forward. Most importantly, I met many other patients who became friends.



Conferences exist as a place where the medical community gathers to discuss progress, challenges and barriers; educate; influence policy; and share research. Networking opportunities exist between sessions, during meals and other social times.

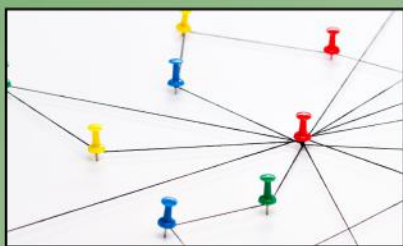
When most people think about medical conferences, they picture researchers, doctors, and policy-makers. As the place where decisions are made about healthcare, it is logical that conferences are also a place for patients following the ‘nothing about us without us’ approach. For years, healthcare has been built around professionals. Yet patients bring something no textbook can teach: the lived experience of managing heart disease day to day, as essential voices shaping the future of care. The end result is more meaningful authentic dialogue and shaping healthcare together.

EMPOWERMENT THROUGH KNOWLEDGE

Conferences are where the newest science is shared. Treatments, prevention strategies, and clinical guidelines are often presented here first. As a patient, being in the room means you don’t just hear about breakthroughs months later—you learn about them as they happen. You may be interested in attending conferences for various

reasons from simply to listen and learn, all the way along a continuum to influencing policy or best practice by standing up and sharing your story. When patients speak, they remind experts that care must fit real lives, not just clinical charts. As more research engages with patient partners, they may want to attend to present research abstracts. Amplifying the patient voice can also be achieved by facilitate a panel session or leading a presentation. Others may have been on a conference organizing committee having a say on the conference agenda. By attending, you make sure the patient perspective isn’t abstract—it’s real, personal, and powerful.





BUILDING CONNECTIONS

One of the most rewarding parts of attending a heart conference is the people you meet. You'll find others living with heart disease, caregivers who share your journey, clinicians, administrators and researchers who genuinely want to listen. These connections can become sources of strength, collaboration, and even lifelong friendships.



INFLUENCE ON RESEARCH AND POLICY

Patient engagement is increasingly recognized as essential. Many conferences now include patient advisory panels, working groups, and sessions where patients directly inform research. Your voice can help shift attention toward issues that matter most — like women's heart health, recovery supports, or the emotional side of living with heart disease.



THE BARRIERS THAT PATIENTS FACE

Not every medical conference welcomes patients. A lot of barriers exist. Attending in-person requires travel and accommodation expenses. Registration costs can be expensive. While the benefits are clear, it's important to acknowledge that not all conferences are open to patients.

- Some conferences do not allow patients to register at all, reserving attendance strictly for clinicians and researchers.
- Others only allow patient attendance after submitting an application and being approved—a process that can feel intimidating or exclusionary.
- Very few conferences offer travel scholarships, reduced fees, or free registration for patient partners, even though patients are often volunteering their time and perspective.



"... patients bring something no textbook can teach: the lived experience of managing heart disease day to day ..."

Excluding patients from conferences can be based on a conference not wanting to lose sponsorship funds from pharmaceutical companies in accordance with the Food and Drugs Act (FDA) regulatory ruling against promoting the sale of a health product to the general public. Given that our government is in favour of patients engaging in healthcare, this kind of arbitrary rule preventing us from accessing conferences is outdated. As healthcare moves away from a professional-centric to a patient-centric model through team-based care and patient engagement, these barriers should be removed. Others do not understand why patients might want to attend, or simply don't want to include patients. These barriers limit the ability of patients to fully participate in shaping the future of care.

Removing them would not only improve equity but also strengthen the quality of dialogue at these events.



PERSONAL GROWTH AND CONFIDENCE

For those who do attend, the experience is transformative. Standing alongside experts, sharing your lived experience, and contributing to the conversation is deeply empowering. Many patients discover new confidence as advocates and leaders. The ripple effect can be profound: you return home not only with knowledge but with a renewed sense of purpose.



GIVING BACK AND CREATING RIPPLES

The knowledge you gain doesn't stay with you—it travels. Whether you share updates with your local support group, your family, or your care team, you're spreading awareness and improving care for others. By showing up, you help create better systems for the next generation of patients.

Every conference has left me filled with inspiration, drive, hope and ideas, but also exhausted by the stimulation and desire to do more. It may take a few days of rest but then I dive back in better educated and equipped to dedicate my time to improving healthcare, fighting for women's cardiovascular health and amplifying patient engagement in research.

I have found conferences to be a place where I can better understand the complexities of my condition which in turn makes me a better patient with more knowledgeable questions for my health care team. They are also an awesome place to connect with others with my condition for support and building of a community with others who share my experiences. I always leave with a positive attitude after hearing about advancements in the field and seeing the dedication and expertise of presenters.

To see a sample email you can send to conference organizers [CLICK HERE](#).





Conferences are more than just gatherings—they're opportunities to drive change, share lived experience, and shape the future of care. Whether attending in person or virtually, being there means being part of the conversations that influence policy, research, and priorities. Your perspective matters. Your voice deserves to be heard. Show up, speak out, and take your place — because when patient advocates are at the table, the entire system improves.



CANADIAN CARDIOVASCULAR CONFERENCES

National Flagship Events

- Canadian Cardiovascular Congress (CCC) – Hosted by Canadian Cardiovascular Society
- CCCN Fall Conference – Canadian Council of Cardiovascular Nurses
- Canadian Heart Failure Society Annual Meeting – Heart Failure Update
- Canadian Society of Cardiac Surgeons Annual Symposium
- Canadian Association of Interventional Cardiology (CAIC) Annual Meeting
- Canadian Society of Echocardiography Annual Conference
- Canadian Society of Clinical Perfusion Annual Meeting
- Canadian Society of Cardiac Radiology Annual Forum
- Canadian Society of Vascular Surgery Annual Meeting
- Canadian Stroke Congress – Includes cardiovascular rehab and prevention tracks

Equity, Gender & Indigenous Health-Focused Gatherings

- Women's Heart Health Summit – Hosted by University of Ottawa Heart Institute
- Indigenous Health & Heart Summit – Focused on culturally safe cardiovascular care
- Black Health Summit Canada – Includes cardiovascular disparities and community-led research
- Heart & Mind Symposium – Intersection of mental health and cardiovascular disease in women
- Prairie Indigenous Cardiology Roundtable – Regional think tank on Indigenous heart health

Specialty & Allied Health Conferences

- Canadian Cardiac Rehabilitation Association Annual Meeting
- Canadian Association of Cardiovascular Prevention & Rehabilitation (CACPR) Conference
- Canadian Pediatric Cardiology Association Annual Meeting
- Canadian Society of Hypertension Annual Scientific Meeting
- Canadian Lipid & Cardiometabolic Congress
- Canadian Arrhythmia Network Annual Symposium
- Canadian Congenital Heart Alliance Annual Gathering
- Canadian Cardiomyopathy Collaborative Forum
- Canadian Society of Geriatric Cardiology Annual Meeting

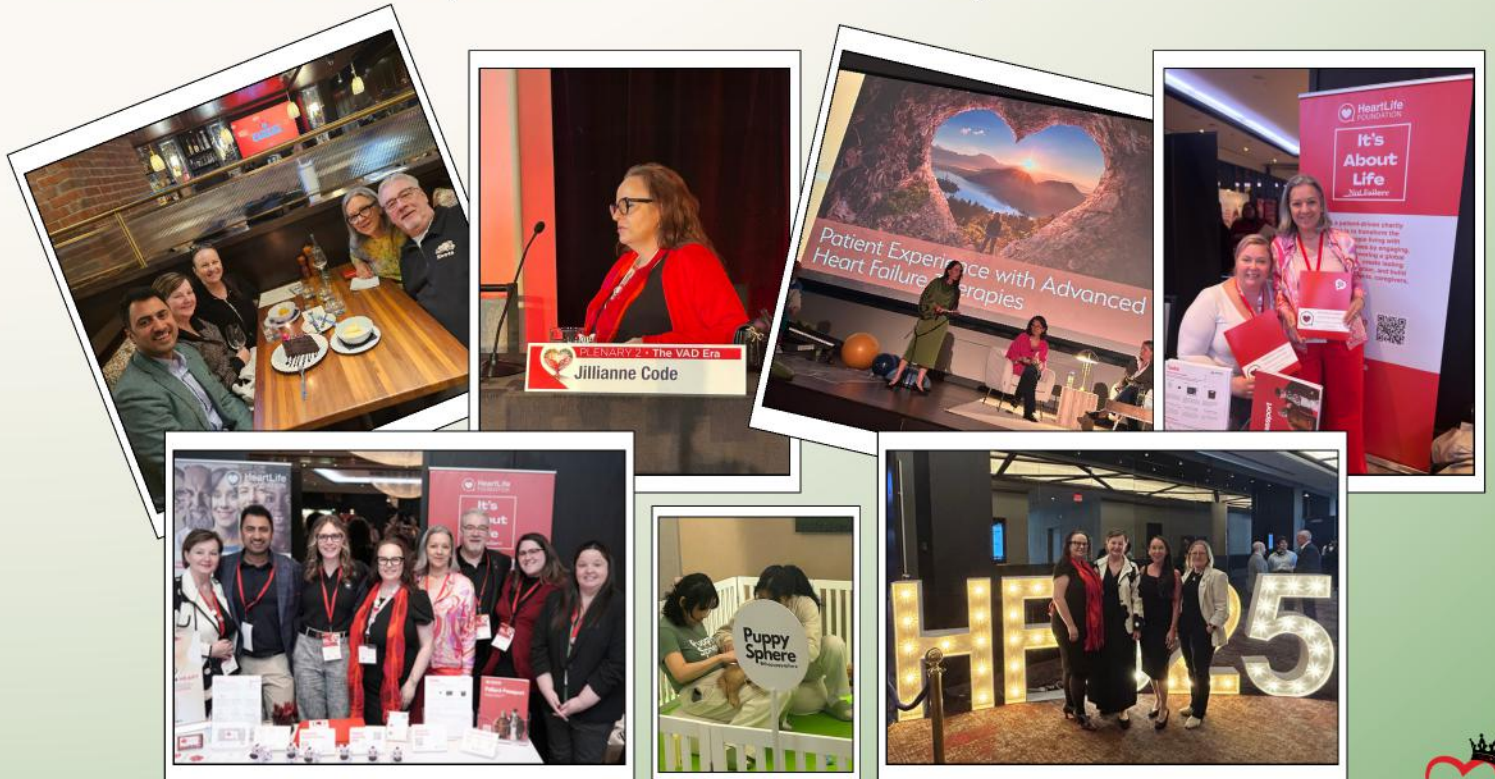


For a more detailed/complete list ...

Canadian Womens Heart Summit - Ottawa - April 2025



Heart Failure Update - Toronto - May 2025





LIVING IN LIMBO LAND UNTIL YOU ARE NOT...



By
AUBYN BAKER, She/Her, Ontario
Congenital Heart Disease, 61
Heart Failure, 2005

My first heart intervention was at the young age of 7 for a congenital heart defect (CHD). We were living in BC and there was no Children's Hospital at that time. My mother managed all my pre, post and during care!

She managed my meds, my appointments, my medical tests, my nutrition needs etc etc. She stayed at the hospital with me, she read to me (Winnie the Pooh - which is still one of my favourite books) ... but I digress into my memories...

Today I sit here at 61 years old staring down another heart intervention ... My mother is sadly long gone, I have no close family members to take care of me this time around. I am having a TAVI (Transcatheter Aortic Implantation) surgery on October 14th, goddess willing. This is the least intrusive approach to replace my aorta and uses a Medtronic Evolution valve. Don't get me wrong, I am grateful I have been accepted for the "simpler" option over open heart surgery (OHS) but it does not make it any less challenging for me.



The journey thus far (although technically it has taken my whole life) most recently began in January 2024, when I went to see my CHD cardiologist at the Ottawa Heart Institute and he said “OH SHIT ” when he saw my results of my most recent tests.



It means seeing my therapist regularly (on zoom), having my weekly mental health check in with my *Royal* women every Monday morning. It means being clear on what I can and what I can't do.

I had just come back from my dream of a lifetime trip to Australia & New Zealand. I had postponed going to see him till after I was back. By the time this whole thing is done, it will have been almost two years of being in LIMBO LAND. It is my worst nightmare, honestly. I hate this time as there is little I can do to speed it up or control in any way.

BUT I can take control of the things I can control to help me deal accordingly. Mental health and self care have been a part of my life for many years now thankfully and so I use my “wellness tools” to help me cope with the unknowns. For me, this includes educating myself on the procedure options, the surgeon, the risks, the advantages of TAVI vs OHS. It means keeping my close family closer, asking for the things I need now and requesting the assistance for the things I will need help with later.

It means finding and using the resources we have in our wonderful heart community. Not being afraid to ask for help, to step back on committees, volunteer roles I have been involved in and will do again once this time is over with.

I also can be in control of the logistics, things like where we stay, what happens with our dogs, who we call on for assistance.

And actively practising self care ... deep breathing and walking in our lovely community of Brockville. It means hugging my husband, our son, our pups.

IT means taking it “ONE DAY AT A TIME” like my pop used to say. By the way, I am having my TAVI on my Dad's birthday, I call that serendipity!



Observations By Jackie

Thank you Aubyn for being so vulnerable in your article. Love the ‘limbo land’ idea as it raises lots of images of what it is like and is very real. I know you got this ... For others, here are some further observations on living in limbo land...

In limbo land, time stretches and contracts. You may feel stuck, yet expected to carry on. The key is to create anchors: routines that ground you, even when everything feels suspended. Morning walks, journaling, or a weekly call with someone who listens without fixing—these small rituals remind you that life is still yours.

Give yourself permission to feel both the weight of waiting and the rush of readiness. They're different kinds of stress, but both are valid. When the call finally comes, you don't need to be perfectly prepared — you just need to be present. Let go of the pressure to “make the most” of the wait or to “stay strong” once it's real. You're allowed to be messy, scared, hopeful, and tired — all at once.

And when it's time, trust that you'll rise to meet it. You've already been practicing resilience in the quiet. Now, you get to use it.

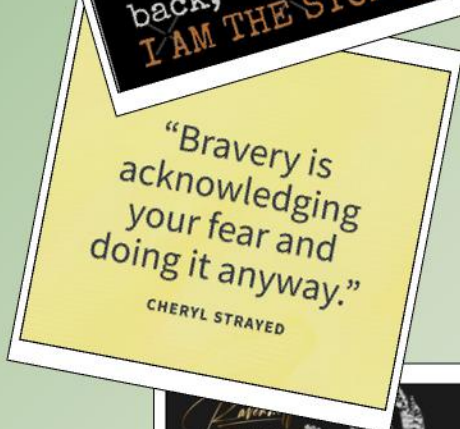
Limbo land isn't easy. But it's not empty. It's where courage grows quietly. And where you learn that uncertainty doesn't mean weakness—it means you're still showing up.



When Life is Not Fair.



By
JACKIE RATZ, Manitoba
Heart Failure, 2017



When Life Is Not Fair - Live Bravely. Love Boldly.

There are days when your heart betrays you — not metaphorically, but literally. When it skips, stutters, or slows, and you're reminded that even the strongest women can be brought to their knees by something they cannot see. Heart failure doesn't care how much you've given, how many lives you've held together, or how bravely you've loved. It arrives uninvited, and suddenly, life is not fair.

But fairness was never the measure of your worth.

You are not forged in ease. You are shaped in fire. In the quiet moments when your body feels fragile, your spirit roars louder. You become the architect of your own justice — not by demanding fairness, but by choosing to rise anyway.

You live bravely. You wake up and choose to try again. You walk slower, but with purpose. You listen to your body — not because it's broken, but because it's sacred. You celebrate the small victories: a deep breath, a good laugh, a day without pain.

You love boldly. You speak truth. You hold hands longer. You stop apologizing for needing rest, and start honoring the strength it takes to keep going. You carry the voices of women who came before you — those who were silenced, underestimated, and unseen — and you walk forward with their courage stitched into your spine.

So when life is not fair, you don't shrink. You expand. You live bravely. You love boldly. And you remind the world that even a heart under siege can beat with fierce, unstoppable grace.





8 Heart-Healthy Comfort Foods For The Chill



By
CHERYL STRACHAN, RD
Alberta
• Author of 'The 30 Minute Heart Healthy Cookbook'
• SweetSpotNutrition.ca



For more delicious heart-healthy food ideas, join "Sweet Spot Heart-Healthy Cooking Club" on Facebook.

As we watch the leaves change colour outside, the air has a fresh cool chill and the weeks move towards the white stuff, do you crave warm, hearty, indulgent foods when the skies turn gray? When the sun sets before dinner, doesn't chicken pot pie sound better than salad? Move over grain bowls, we're having mac & cheese.

Good news... Many comfort foods can still fit into your heart-healthy life!

How?
Let's explore...

First, let go of the myth that carbs are a guilty pleasure.



Whole grain carbohydrate-rich foods can actually benefit heart health, especially the low glycemic-index (GI) ones. Think steel-cut oats, barley, brown rice, whole-grain bread, even pasta (cooked al dente).

They may be dull on their own, but we can dress them up with scrumptious sauces, roasted veggies, spicy spices, and cheesy cheeses. (Cheese, in moderation, is fine for heart health. It's a good source of protein, which slows the release of carbohydrates into your bloodstream after a meal. Use it strategically, to jazz up salad, beans, and other foods that might need a little help)

Second, remember that fat, which makes food more satisfying, can also be heart-healthy.

Pureed toasted walnuts, crunchy pecans, and tangy tahini sauce are some of the high-fat ingredients used to make dishes below richer, creamier, crispier, and tastier. They're also mostly unsaturated fats, which are easy on your arteries.

Back in the day, we were taught to limit fat intake, but unsaturated fats can help lower cholesterol and triglycerides when you have more of them and less saturated fats and refined grains. So relax and enjoy!



Third, every meal doesn't have to be a perfect ten, nutrition-wise.



If most of your meals are a seven or eight out of ten, fantastic. Less than that is okay occasionally, and those foods, from chocolate croissants to smoky, juicy, fall-off-the-bone tender ribs – whatever you really love – might just support your mental health, and that matters too!

Flexibility here can actually enable healthier eating in the long run. If you feel like you have to follow strict food rules, you may give up or even spiral into binge eating after the first “imperfect” choice. Flexibility means social events, travel, and demanding days become less stressful, leaving you ready to take on heart health again tomorrow.

Mouthwatering Heart-Healthy(ish) Comfort Foods

When you want to just cozy up by the fire with something warm and nourishing, here are some of my favourites:



Oatmeal - Liven up this cholesterol-friendly staple by stirring in a tablespoon of chocolate chips and topping with sliced banana. Or sprinkle with chopped toasted pecans, brown sugar, and peaches. We're really not worried about a teaspoon or two of sugar added to whole foods.



PB & J - Surprise... a classic peanut butter and jam sandwich has more protein than two eggs! Plus it's rich in those heart-healthy unsaturated fats, fibre, potassium and more. Use whole-grain bread, reduced-sugar jam, and natural peanut butter, if you like those things.



Roasted Sweet Potatoes - Roasting caramelizes their natural sugars and crisps up the outside while leaving the inside soft and buttery. Pair with pan-fried steelhead trout and sauteed spinach for an easy, delicious meal.



Muhammara Chickpea Skillet - If you're craving heat more than sweet, this rich, spicy dish converts the classic Middle Eastern dip into a flavourful vegetarian meal, ready in just 20 minutes.



Turkey Chili with Barley - This longtime favourite of ours from beloved food writer Julie van Rosendaal combines robustly seasoned ground turkey, barley, white beans, and tomatoes. It will fill you up like a big hug on a cold day. Even better the next day and after freezing.





30-Minute Lentils with Tangy Tahini Sauce – Thanks to the creamy lemon tahini sauce and sun-dried tomatoes, you’ll be amazed at how good lentils, peppers, spinach, and brown rice can taste. We like this so much I often make it for Christmas or New Year’s Eve!



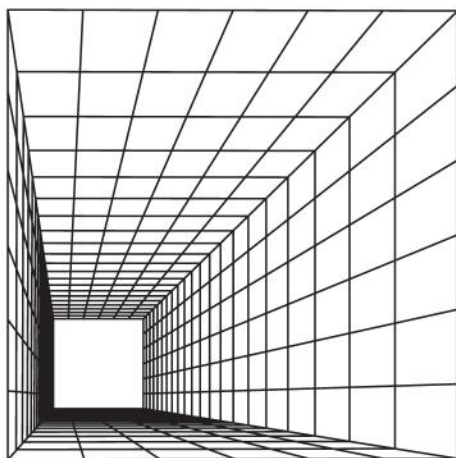
Pasta with Roasted Vegetables and Goat Cheese – Newsflash: al dente cooked pasta is actually a low-GI food, even if it’s not whole wheat! And it’s a crowd-pleasing vehicle for veggies and other foods you might be trying to embrace in the name of heart health.



Apple Crisp – A heart-healthier version of the classic, but you’d never know it. I used plenty of walnuts, whole wheat flour, and less sugar. (The baked apples give plenty of sweetness.) You could even call this a nutritious breakfast, perhaps paired with a dollop of plain Greek yogurt for extra protein.



PUT IT IN PERSPECTIVE



Now if you’re thinking, “Hey Cheryl, sugar! / carbs! / saturated fat! / etc.” you might be falling into the trap of an ‘all or nothing’ mindset.” Nope, nope, nope. Don’t go there. Don’t let perfect be the enemy of good.

If steaming apples with a crispy sweet oat and walnut topping satisfies your craving for comfort food, maybe that’s one less time you reach for ice cream, potato chips, or brownies. (Mmmm, brownies. Be right back.)

Ha ha. I love those too. But foods that nourish the body as well as the soul... that’s what I call the “sweet spot”!





Sweet Spot Nutrition
Heart health, for life.

Cranberry Pecan Baked Oats

By CHERYL STRACHAN, RD, Alberta

It turns out that frozen cranberries are really good in baked oats (I usually use blueberries). Substitute whatever nuts or seeds you have on hand. Good topped with berries and/or yogurt.

Prep Time	Cook Time	Total Time
20 mins	45 mins	1 hr 5 mins



Ingredients:

- 3 cups rolled oats
- 1/3 cup sunflower seeds
- 2/3 cup pecans roughly chopped
- 1 cup frozen cranberries
- 1/3 cup brown sugar
- 2 tsp baking powder
- 1 tsp cinnamon
- 1/4 tsp salt
- 3 eggs
- 1 cup milk
- 2 tbsp canola oil
- 2 cups mashed ripe bananas
substitute unsweetened
applesauce if needed



Method:

- 1** Preheat the oven to 350F. Lightly oil a 9X13-inch baking dish.
- 2** In a medium bowl, combine all the dry ingredients.
- 3** In a large bowl, whisk together the eggs, milk, oil and bananas.
- 4** Add the dry ingredients to the wet, and mix together.
- 5** Pour the mixture in the prepared baking dish and bake for about 45 minutes, until the oatmeal is lightly browned on top and a toothpick inserted in the middle comes out clean.

Nutrition: (Approximate)

Serving:	Calories:	Fat: 17g	Carbohydrates: 49g	Sodium: 234mg
8	375	Saturated Fat: 2g	Fibre: 6g	Potassium: 457mg
		Cholesterol: 72mg	Protein: 10g	Sugar: 21g



SNACK CHOICES FOR A HOLIDAY GATHERING

- **SPICED NUTS** – Roast almonds, walnuts, or pecans with rosemary, smoked paprika, and a light drizzle of olive oil.
- **MINI HUMMAS CUPS** – Little glasses or cups with hummus at the bottom and colourful veggie sticks (carrots, cucumbers, bell peppers) standing upright.
- **CAPRESE SKEWERS** – Cherry tomato, basil, and a mini bocconcini on a toothpick, drizzled with balsamic glaze.
- **FRUIT SKEWERS** – Alternate red grapes, strawberries, and kiwi for holiday colours.
- **STUFFED DATES** – Fill with walnut halves or almond butter; sprinkle with a little cinnamon.



For more delicious heart-healthy food ideas, join "Sweet Spot Heart-Healthy Cooking Club" on Facebook.



ALL ABOUT Y♥U!



Jennifer Monaghan, BC



SOLD OUT Lawn Bowling tournament event for #HerHeartMatters.
Raising awareness and funds for women's heart health in Kelowna on
August 14, 2025 - CONGRATULATIONS!!!



Stevie Goller, MB
(On right)

Speaking as a WWLE at the
Rosé Soiree St. Boniface Hospital
fundraising gala for women's heart
health in Winnipeg on Sept 6, 2025.



Jackie Ratz, MB
Lory, Bev, me, Lily, Barb!

**FREE #ForHerHeart Yoga & Lunch in
the Park event.** Raising awareness for women's
heart health in Winnipeg on Aug 9, 2025.



Have an event/presentation to share? Or an important life milestone?
Share to receive a \$30.00 GC for LifeInHearts.ca - Email Jackie@Heartlife.ca



CREATING A SUSTAINABLE LIFE



By

ANNIE SMITH, PTS, FIS, RAB II

Ontario,

Cardiac Sarcoidosis, 2015

• All the Right Moves Personal
Training & Fitness



H

appy Fall!!

I hope the summer months were kind to you and that you were able to continue being the best version of yourself.

As you embrace Fall and what it brings - beautiful colours of leaves, crisper days, pumpkin spice lattes, sweater weather, Halloween and Thanksgiving - my wish is that you feel cozy and happy! Make plans to enjoy and ease into the shorter daylight hours as well. It may feel like there's less time to do things, especially when factoring in time for movement/fitness, but with a plan, you can do it!

Let's get started and **MAKE IT FUN!**
It's all about beautiful **YOU** moving your body to sustain good health, strong bones, flexible muscles and a great mindset to go with it!

Select 3-4 days/week that you will do consistent movement for 30 minutes each of those days, minimum. If that seems overwhelming, break it into three 10-minute sessions to begin.

3 IDEAS TO HELP WITH YOUR GOALS!

IDEA #1

Walking Goal 3 times/week, 30 minutes each time. Take your fur baby, child, partner or family/friend along with you and catch up on the day/week!

While walking, challenge your balance by alternating between toe walking, heel walking, high knee-ups and butt kicks every 20 steps, then repeat all 4, 5 more times. If you're walking with company, challenge each other - have FUN with it!

Using these 4 different leg movements activates the smaller and larger muscles in the legs and increases movement and flexibility in the ankle, knee and hip joints.



IDEA #2

Upper body mobility with a broomstick to increase range of motion - which is beneficial for many activities in life and this season, especially when raking leaves!

A) With legs hip-width apart, knees bent slightly, tailbone tucked in, abs pulled in towards spine, shoulders back, hold a broomstick with a wide overhand grip in front of your body by your thighs. With arms straight, raise them towards the sky. If they will go behind your head (or more), take it there and hold for a wonderful front shoulder and chest stretch. If it goes overhead and back, take it that far. Do this movement forward and back for 10-20 times, slowly. Take breaks when you need to. Feel the warmth generating in your shoulders and back.





B) Create a flowing, circular movement around your body with the same grip on the broomstick. Move slowly and create the mind-body connection to create the movement. Do it 10x one way, then circle the other way.

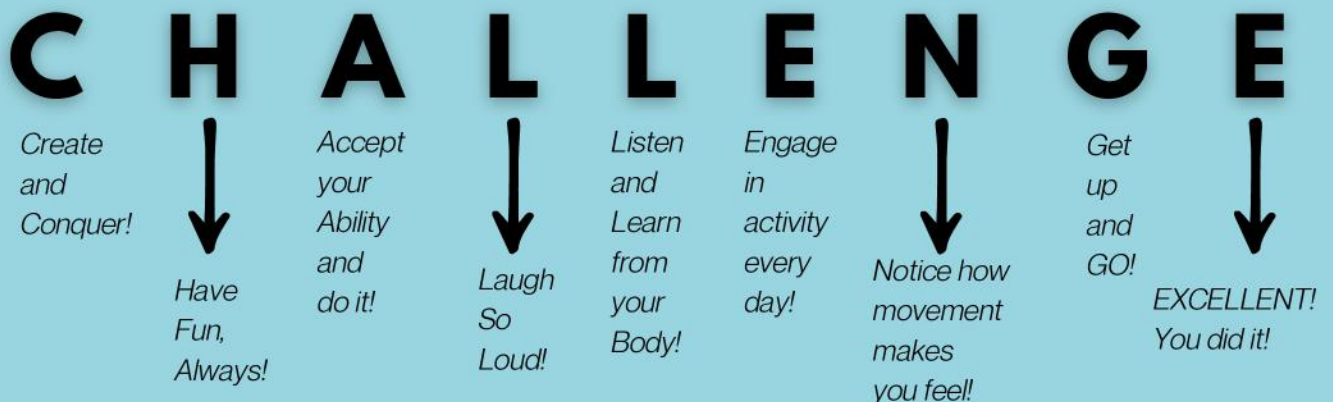
C) With legs hip-width apart, same grip as before on broomstick, rotate your torso and arms from side-to-side, generating warmth and stretching within your torso and side body. Do it 10x each side.



D) With the same standing stance, hold the broomstick with an overhand, wide grip at shoulder height. Now pull it towards your chest, keeping your wrists in line with your shoulders and not dropping your elbows. Now push it forward. Continue to pull and push for 20+ times, taking breaks when needed. To make it more challenging, strap ankle weights on both ends of the broomstick

Repeat A-D, 3 times.

ANNIE'S TIPS



IDEA #3



A) Lunges – forward lunge/back lunge/side lunge
– 10 each leg/each way



B) Side steps – incorporate a staircase as well –Use a booty band for extra resistance if you have one. Time: 1 minute



C) Squat up and down out of a chair – 20 times



D) Wall push-ups - 10 times



E) Wall sit – Work your way from 20 seconds to 2-4 minutes.

Repeat A-E one more time.

Always have FUN while moving, so that way you'll be interested and invested to continue.



**REMINDER:
IF IT DOESN'T
CHALLENGE YOU,
IT DOESN'T
CHANGE YOU...**

Congratulations on showing up for you & choosing to start creating a healthy lifestyle of physical fitness and mindfulness.

I am so proud of you! See you next time! Namaste.

Annie is a regular contributor to the Ted Rogers Patient information website. Her 'HEARTFIT' videos can be found at OurHeartHub.ca



2025

ACTIVITY CORNER

In Remembrance



Life In Hearts: Begin • Blossom • Become!

LIFE IN HEARTS

Living Bravely. Loving Boldly.

www.LifeInHearts.ca

LifeInHearts@HeartLife.ca

[@LifeInHearts](https://www.instagram.com/LifeInHearts)



Life In Hearts E-Magazine is the property of
Jackie Ratz and HeartLife Canada