

# Angina

*“A cheerful heart is good medicine...” (Proverbs 17:22)*

Angina is chest pain that occurs when some portion of the heart muscle does not receive enough blood and the oxygen that it carries. This happens when the vessels that supply the heart muscle with blood become narrowed or blocked, and that area of the heart cannot get the oxygen it needs. The pain is usually described as tightness, pressing, or squeezing, and while it is usually in the chest, be aware that it may be felt in one or both arms, the neck, jaw, or back. This pain may be accompanied by indigestion, nausea, shortness of breath, weakness, and/or sweating. Physical exertion is the most common trigger for angina, but other triggers include emotional stress, extreme cold or heat, heavy meals, alcohol, and cigarette smoking.

Not all chest pain is angina, which is chest pain caused by the insufficient blood flow to the heart. It may be muscular or gastric in origin. However, prolonged pain unrelieved by rest or accompanied by other symptoms should never be ignored. It's imperative to have these symptoms checked out immediately, and not to just wait and see if they will resolve themselves. Deciding to “tough it out” may be the last decision you make.

**Stable** angina is a condition that happens when the heart is working too hard, as with physical exertion. It's something many people learn to live with by recognizing the symptoms and treating them with nitroglycerin tablets (or nitro spray) under their tongues, and with rest. This type of angina follows a pattern and is not life threatening. **Unstable** angina (as the name suggests) is a dangerous state of chest pain that occurs for no apparent reason and does not respond to rest or medications. This type of chest pain must be treated immediately!

This is not to suggest that every ache and pain is cause for panic, but chest pain is an indication that something is going on, and the source of this pain needs to be identified and treated. Be aware that a heart attack is a life threatening emergency and every second counts.

Immediate treatment can stop an attack in progress, so don't delay. American Heart Association guidelines instruct us to call 911 before beginning CPR for adults. (For children, begin lifesaving methods for 60 seconds before calling 911, if you are alone)

Angina does not mean a person has had a heart attack. It is a warning that a myocardial infarction, (heart attack), may occur if the situation isn't corrected. Since coronary heart disease is America's number one killer, the best way to avoid coronary artery disease is to control all possible risk factors.

A physician can diagnose Angina with a verbal history, physical exam, an EKG, and possibly a stress test. A stress test shows the physician exactly what happens to the heart when it is subjected to strenuous physical exercise. This is usually followed with a nuclear scan which shows blood flow, and an echocardiogram that reveals just how strong your heart muscle is. Other tests are becoming more common, including an MRI, PET scan, and/or cardiac catheterization. There are also blood tests that show inflammation of the heart, which occurs when the heart is damaged.

Some risk factors, such as heredity, gender, race, and age cannot be changed, but many **are** under our control. These risk factors include:

- High blood pressure
- Cigarette smoking
- High cholesterol levels
- Excess weight
- Stress

- Sedentary life style

You can check your risk factors for heart disease at the following web site:

[www.americanheart.org](http://www.americanheart.org)

Another helpful site:

[www.nlm.nih.gov/medlineplus/angina.html](http://www.nlm.nih.gov/medlineplus/angina.html)