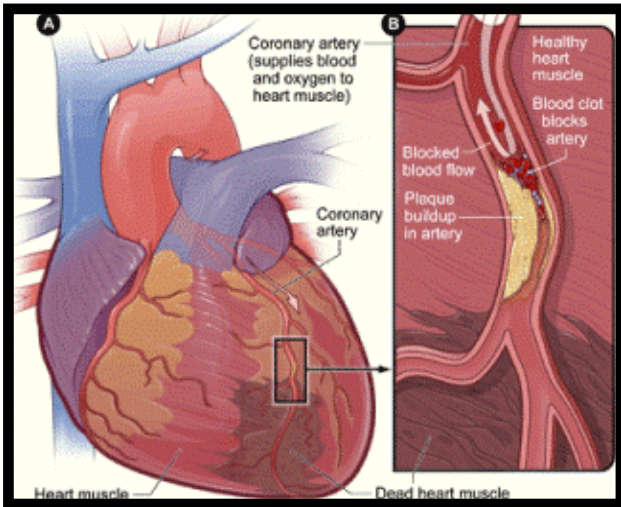


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# Heart Attack Causes, Symptoms And Signs

## What Is Heart Attack?



A heart attack (sometimes called a coronary, a coronary thrombosis, or a myocardial infarction or 'MI') is when part of the heart muscle stops working because not enough oxygen is able to reach it through the heart's blood supply - the coronary arteries. Any heart tissue that stops working during a heart attack is replaced by scar tissue that is unable to work again and will not heal. Therefore the more heart tissue that is starved of oxygen, the less well the heart can function after a heart attack.

## What Are The Causes Of Heart Attack?

The blood supply to the heart is usually stopped by a blood clot in the coronary arteries, causing the heart attack. The arteries are narrowed in places due to 'plaques' - a build-up of the fatty substance cholesterol over many years. As this build-up of cholesterol increases, the arteries narrow - a process known as atherosclerosis. This process is speeded up by many other things, including smoking, high blood pressure, too much fat in the diet and diabetes. Being at risk of having a heart attack may also be passed down a family, as having parents or other relatives who have had a heart attack can increase the risk of having a heart attack. Most heart attacks occur in middle-aged men, and are rare under the age of 35. Women tend to have their heart attacks after their menopause.

## What Are The Signs And Symptoms Of Heart Attack?

The main symptom is a dull, 'heavy' type of chest pain, usually in the centre of the chest. This is often described as a 'pressure' or 'like someone sitting on my chest' or an indigestion-like symptom. Pain may be felt in the jaw. There is usually some sweating and a feeling of being sick, or actual vomiting. The patient looks unwell, with a greyish colour and may be short of breath. However, up to a quarter of all heart attacks either have no symptoms - a 'silent' heart attack - or very mild symptoms which may be ignored by the patient. The most common time for heart attacks to occur is in the early morning, from 5 am to 10am.

## Will I Have Any Tests Or Investigations?

The medical history and appearance of the patient will suggest to the doctor a diagnosis of a heart attack. This diagnosis is confirmed by an electrocardiogram (ECG) which shows the heart beat and electrical pattern of the heart. This shows up any non-working tissue in the heart as well as any heart muscle which is short of oxygen. A heart attack will produce very characteristic changes on an ECG tracing. If the ECG appears normal, or if the changes are only mild or borderline, then blood tests carried out some hours later can confirm whether there has been damage to the heart muscle or not. These tests pick up proteins which are released into the blood from heart muscle that has stopped working.

## What Treatment Might I Need?

The aim of treatment is to restore the blood supply to the heart as quickly as possible this will stop a heart attack.

The best way to do this is to dissolve the blood clot in the artery - a process called thrombolysis. The simplest way to do this is to give the person a dissolvable aspirin tablet under their tongue if they are conscious since this will begin thinning the blood immediately. Once in hospital, 'clot-busting' drugs can be given to continue this treatment, and these will open the majority of blocked blood vessels within 90 minutes.

These drugs are usually given on a coronary care ward which specialises in dealing with heart attacks. Speed is important here as most of the permanent muscle damage caused by a heart attack has taken place by 6 hours after the start of the attack. In specialised centres, patients may be given an angioplasty which is where a tiny balloon (known as a catheter) is pushed into the artery under X-ray guidance and to the site of the blockage before being inflated. This pushes the clot and plaque out of the way and so restores the circulation in the heart to normal again. Tablets may be given to prevent any complications. These include:

$\beta$ -blockers - which reduce the strain on the heart. These drugs may need to be taken for life.

ACE inhibitors - another class of drugs - which improve the heart muscle healing process.

### **What Course Will The Illness Follow?**

Most patients admitted to a coronary care unit will spend several days there being monitored before being transferred to a general ward. They will be encouraged to begin walking around after a few days and will be monitored for any problems with the heart rhythm, shortness of breath or further chest pain. If a patient continues to suffer with any of the above problems, they may need further treatment, such as a change in medication, angioplasty or heart surgery. Provided there are no complications, most patients are allowed home after 5 to 8 days, and recovery is gradual. The time needed to return to normal activities depends on the size of the heart damage, with most patients being able to resume normal daily and sexual activity within 3-4 weeks. During this recovery period, vigorous exertion should be avoided such as heavy lifting or any work which causes sweating or shortness of breath.

### **Can I Do Anything To Help Myself?**

As well as continuing to take regular medicines such as aspirin and  $\beta$ -blockers, there are a number of ways to prevent the chances of a further heart attack:

1. The most important one is to stop smoking and never start again.
2. Losing weight reduces the strain on the heart, as does controlling any high blood pressure.
3. A low-fat diet will reduce the amount of cholesterol in the blood, and regular steady exercise will strengthen the heart muscle.
4. Try to reduce the amount of stress you may be under, which may mean taking a long look at your job and pace of life in general.

### **Tell Your Doctor**

1. What symptoms do you have?
2. What type of pain is it?
3. When did the symptoms begin?
4. What were you doing at the time?
5. Does anyone in your family have heart problems?
6. Do you smoke?
7. Have you had any similar symptoms before?
8. Are your symptoms getting worse or better?

### **Ask Your Doctor**

1. Is my heart beating regularly?
2. Will I recover normally?
3. Do I need to stay on treatment for life?

4. Are any of my family at increased risk of heart problems?
5. Will I be able to return to my usual work?

By Roger Henderson, MB BS, LMSSA

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