

ANGINA

1) Myth: Chronic angina is a disease.

Chronic angina is not a disease; it is a symptom of a heart disease. The heart problem that usually leads to chronic angina is coronary artery disease.

2) Myth. Anginal symptoms are the same for everyone: pain or discomfort in the chest area.

People experience angina differently. Symptoms of chronic angina include

Discomfort or pain in the chest or surrounding areas (arm, shoulder, back, neck, or jaw)

Feeling short of breath or dyspnea

Feeling tired or fatigued

Feeling lightheaded

Nausea or vomiting

Excessive sweating

3) Myth: There is nothing you can do when angina interrupts your life.

There are many things you can do that may improve your quality of life. Here are some ideas that may help you take control and live better with angina:

Talk with your cardiologist about how angina affects you. Work together to create the best treatment plan for you.

Form a support group with friends and family members.

Learn to manage stress.

Find new health information about angina and healthy living.

4) Myth: Downsizing your life is the only way to manage angina symptoms.

. Your cardiologist may suggest one or more of these options based on your symptoms, health, and medical history:

Lifestyle changes.

Medications for angina.

Medical procedures, such as bypass surgery or coronary artery repair (angioplasty).

Cardiac rehabilitation.

Enhanced external counter-pulsation therapy (EECP), a treatment that improves the flow of oxygen-rich blood to the heart muscle; it involves placing cuffs on the legs and inflating and deflating in rhythm with the heartbeat

5) Myth: Making lifestyle changes can not affect the frequency of angina.

There are a number of lifestyle changes you can make that may help reduce the number of angina episodes :

Avoid eating so much that you feel stuffed, if your angina is triggered by large meals.

Reduce stress in your daily life. Avoid stressful situations.

Change your diet. Talk with your cardiologist about dietary changes that may be right for you.

Quit smoking or using tobacco or nicotine in all forms (cigarettes, pipes, cigars, chewing tobacco).

Lose weight if you are overweight. Talk with your cardiologist before starting any weight loss program.

Get more physically active. Talk with your cardiologist about what types of exercise are right for you.

Take all of your medications as prescribed.

You need to exercise strenuously to reduce cardiac events.

This myth grew from the advice of well meaning cardiologists who advocated aerobics two or three times a week to keep you and your heart healthy. However, this advice is for healthy people. The rules change completely for chronic angina patients. Diving into strenuous paces of aerobics can be fatal. Exercising regularly and moderately under the supervision of a medical professional is the safest route. Intense workouts tend to stress the heart and raise the blood pressure for a short time; this may cause a spasm in the artery to the heart in heart patients.

Physical examination or an electrocardiograph can detect heart disease.

Physical examination of the heart in someone who may be suffering from angina is seldom helpful in detecting heart disease. The electrocardiogram cannot predict heart disease especially when the pain or the attack of angina has subsided. It can only show signs of stress. This coupled with several risk factors like age, gender, a history of diabetes or hypertension, habits like smoking or obesity can help the doctor to suspect heart disease. Tests like a stress test or radioisotope imaging of the heart is the next step that can confirm heart disease.

