

Recognize the Risks and Symptoms of Coronary Artery Disease

Coronary Artery Disease (CAD) affects more than 13 million Americans, many of whom may not even know they are at risk. CAD, which is the leading cause of death in the US for menopausal women, describes a potentially fatal condition in which the arteries become narrowed or clogged, restricting blood flow to the heart and depriving it of oxygen and other vital nutrients. CAD, sometimes called coronary heart disease, can lead to stroke, heart attack and even death. The Medical Encyclopedia and Guide to Family Health notes: "The incidence of coronary artery disease is definitely greater among overweight people. Other forms of heart disease do not appear to be appreciably greater among the obese. But it should be remembered that obesity places an additional burden upon an already weakened or impaired heart."

Recognizing risk is imperative in early detection of CAD. Many things can increase a person's risk for heart disease:

- Men in their 40's have a higher risk.
- Bad genes (heredity). A person is more likely to develop the condition if family members have history of heart disease...especially if they had it before age 50.
- Diabetes is a strong risk factor.
- High blood pressure increases the risk of coronary artery disease.
- Smokers have an increased risk.
- Chronic kidney disease can increase the risk of developing CAD.

Recognizing the symptoms can greatly assist in early detection and medical control of CAD. The most common symptom of CAD is chest pain. Or it may be felt as an aching, burning, numbness or pressure. In some cases, chest pain, angina is felt in location other than the chest, including the shoulder, arms, neck, back or even the jaw.

Responding to symptoms of CAD can save, or prolong life. To prevent heart attack, a person needs to understand the symptoms of CAD and seek treatment for it. Whether it is shortness of breath, irregular heartbeat, dizziness, nausea, or unexplained sweating, the sooner action can be taken, the better.

When symptoms do not go away within five minutes, a call to 911 is appropriate. The 911 call is better than driving to the hospital, as patients who arrive by ambulance usually receive more prompt attention than those who walk into an emergency room on their own.

A key to preventing coronary artery disease is to have regular check-ups. A routine exam, for example, may reveal that a person has high cholesterol or high blood pressure. Often, this is the first indication that he/she has (or is at risk for) CAD. To prepare for a referral to a cardiologist, the person should adhere to any pre-appointment dietary restrictions. It is also important to write down a list of symptoms, any medications being taken, and be able to report on family history of heart disease. It is suggested that a family member accompany the person at appointment time.

When the presence of coronary artery disease is suspected, proper diagnosis and treatment is in order. A physician can perform a number of diagnostic tests to confirm the diagnosis. These tests include an electrocardiogram, echocardiogram stress test, coronary catheterization, CT scan or magnetic resonance angiogram.

When the diagnosis is confirmed, a number of approaches can be taken to treatment. For example, there are various drugs that can modify LDL, bad cholesterol levels in the blood. Aspirin can also help, since it thins the blood. Calcium channel blockers control high blood pressure and open up the blood vessels, increasing the blood flow to the heart. Beta blockers, which slow the rate and thus decrease the hearts' demand for oxygen and nitroglycerin are other approaches.

When medications are not enough, a physician might recommend more aggressive treatment, such as stents or balloon angioplasty. Then there is coronary artery bypass surgery. In this procedure, one or more blocked coronary arteries are by-passed by a blood vessel graft to restore normal blood flow to the heart. These grafts usually come from the person's own arteries and veins located in the chest, leg or arm. The graft goes around the clogged artery (or arteries) to create new pathways for oxygen-rich blood to flow to the heart.

Last, but not least, is lifestyle. People who have uncontrolled diabetes, high cholesterol or high pressure are at high risk of CAD, Use of tobacco, having a sedentary lifestyle, and being overweight or obese also make one more susceptible. Even undue stress or uncontrolled anger might need to be addressed.

Lifestyle is not only a key to treating coronary artery disease, but is also the key to prevention. It's never too early to make healthy lifestyle changes, such as quitting smoking, eating healthier foods and becoming more physically active. These are primary lines of defense against coronary artery disease and its complications, including heart attack and stroke.

Resources:

American Heart Association

<http://www.americanheart.org>

Centers for Disease Control and Prevention

<http://www.cdc.gov>

US Department of Health and Human Services

www.hhs.gov

Family Doctor

<http://FamilyDoctor.org>