



ANGINA PECTORIS

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PRACTICE OF MEDICINE

ISCHEMIC HEART DISEASE/ CORONARY ARTEY DISEASE.



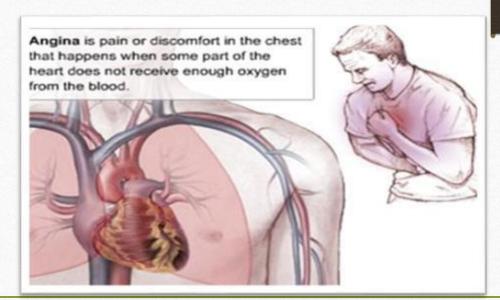
- 1. ANGINA PECTORIS
- 2. MYOCARDIAL INFARCTION
- 3. SUDDEN CARDIAC DEATH
 4. CHRONIC ISCHEMIC
 HEART DISEASE.

A GROUP OF RELATED SYNDROMES
DUE TO IMBALANCE BETWEEN
MYOCARDIAL O2 DEMAND AND
SUPPLY FROM CORONARY ARTERY.

DEFINITION.

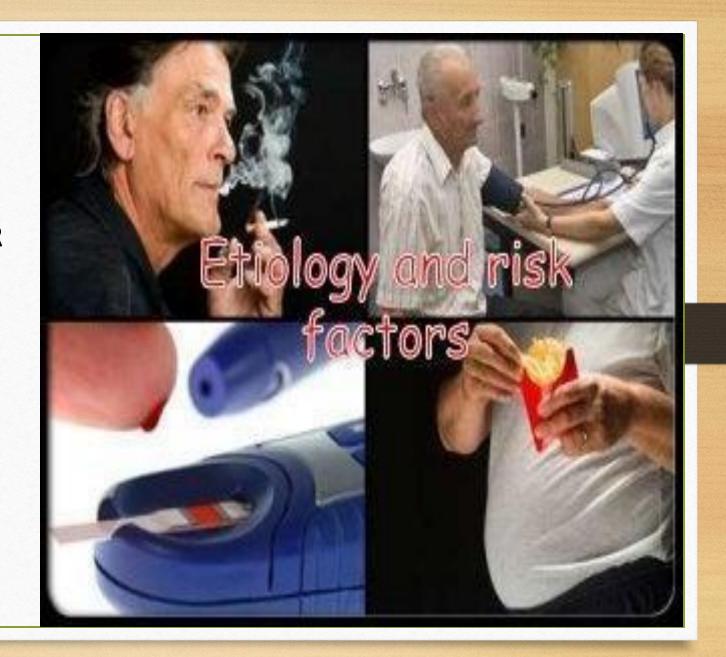
LATIN: STRANGLING OF CHEST

ANGINA PECTORIS IS THE SYMPTOM COMPLEX CAUSED BY TRANSIENT MYOCARDIAL ISCHEMIA AND CONSTITUTES THE CLINICAL SYNDROME RATHER THAN A DISEASE.



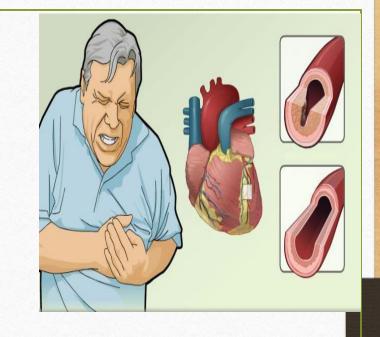
RISK FACTORS.

- 1.SMOKING
- 2.TOBACCO USE
- 3.HIGH BLOOD CHOLESTEROL OR TRIGLYCERIDES LEVEL
- **4.LACK OF EXERCISE**
- **5.OBESITY**
- **6.HIGH BLOOD PRESSURE**
- 7.STRESS
- 8. DIABETES
- 9. FAMILY HISTORY
- **10.OLDER AGE**



ETIOLOGY.

- 1. CARDIAC ATHEROMA IS THE MAJOR CAUSE OF ANGINA PECTORIS [ATHEROSCLEROSIS].
- 2.THROMUS IS DANGEROUS AS IT CAN OBSTRUCT BLOOD FLOW TO MAJOR ORGANS.IF THROMBUS NARROWS 1 OF MORE ARTERY OF HEART MUSCLE PAIN OCCURS.



- 3. CAN ALSO BE CAUSED BY ANEMIA WHERE THE FLOW IS INADEQUATE AND THE BLOOD DOESN'T HAVE ENOUGH RBC TO CARRY O2.
- 4. EMBOLIC EVENTS CAN RESTRICT O2 SUPPLY TO MYOCARDIUM.

PATHOPHYSIOLOGY.

DUE TO THE CAUSE

O2 DEMAND INCREASE IN BLOOD

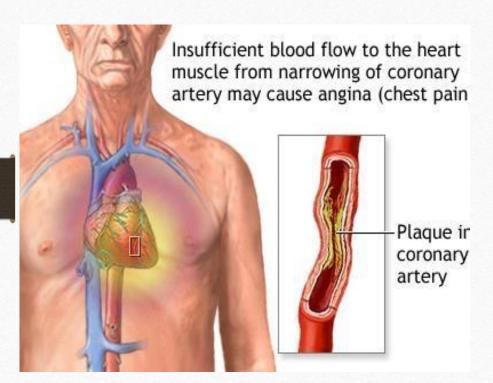
HEART NEEDS MORE BLOOD SUPPLY

CORONARY ARTERY DILATE AND SUPPLY MORE BLOOD TO HEART

HEART NEED MORE BLOOD

O2 DECREASES IN HEART AND DEVELOP ISCHEMIA

STARTS ANGINA [PAIN] IN PECTORIS [CHEST MUSCLE].



CARDIOVASCULAR

- 1. HISTORY IS BY FAR THE MOST IMPORTANT FACTOR IN MAKING DIAGNOSIS
 - 2. SQUEEZING PAIN OR HEAVINESS IN CHEST, NECK, JAW, ARMS, SHOULDER AND BACK THAT OCCURS SUDDENLY

DECREASE PULSE RATE
BP INCREASES BECAUSE OF SYMPATHETIC
STIMULATION
AND MIGHT DECREASE BECAUSE OF DECREASE
CONTRACTILITY IF CARDIOGENIC SHOCK DEVELOPS
5.DIAPHORESIS
6.DYSRHYTHMIA



RESPIRATORY.

SKIN.

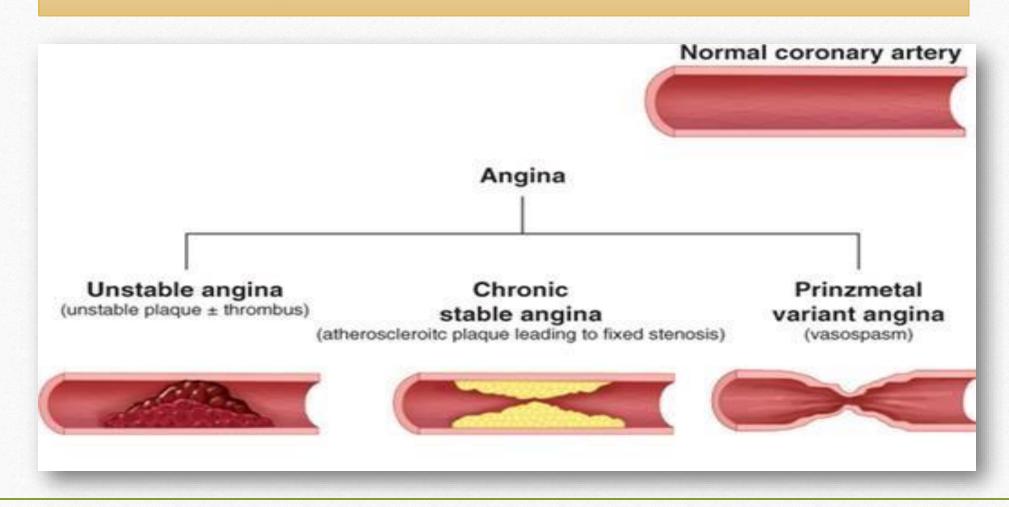
- 1. CHEST HEAVINESS
- 2. SHORTNESS OF BREATH
- 3. PULMONARY ODEMA

- 1.COOL AND CLAMMY SKIN
- 2.DIAPHORETIC
- 3.PALE

GENITOURINARY.

DECREASE URINARY OUTPUT MAY INDICATE CARDIOGENIC SHOCK

TYPES OF ANGINA PECTORIS.



STABLE ANGINA.

- -PREDICTABLE
- -FAMILIAR PAIN PATTERN
- -INJURY TO MYOCYTES IS REVERSIBLE
- -PROMPTED BY: PHYSICAL EXERTION, EMOTIONAL STRESS, HEAVY MEAL, LOW TEMPERATURE
- -CENTRAL CHEST PAIN, SWEATING, DISCOMFORT, BREATHLESSNESS
- -SUBSIDE WITH REST
- -RESPONSE WELL TO MEDICATION [NITROGLYCERIN RELIEF]
- -ST SEGMENT DEPRESSION

UNSTABLE ANGINA

- -UNPREDICTABLE, OCCURS EVEN AT REST
- -CHANGED PAIN PATTERN
- -INJURY IS REVERSIBLE IF TREATED ON TIME
- -MORE SEVERE, LASTS LONGER, OCCURS EVEN AT REST
- -RESPOND LESS TO MEDICATION
- -ST SEGMENT DEPRESSION
- -IS AN MEDICAL EMERGENCY AND OFTEN PROCEEDS HEART ATTACK.

PRINZMETAL ANGINA / VARIANT ANGINA

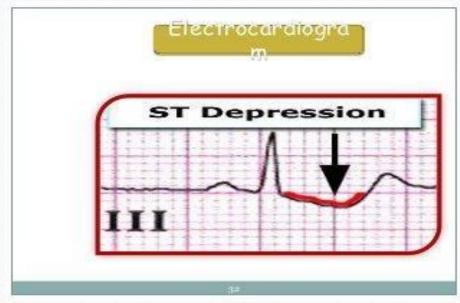
- -CAUSED BY VASCULAR SPASM OF CORONARY ARTERY THAT REDUCE BLOOD FLOW
- -CAN OCCUR AT REST, USUALLY OCCURS AT NIGHT OFTEN DURING DAY
- -EMOTIONAL STRESS, SMOKINGS, DRUGS SUCAH AS COCAINE ARE TRIGGERS
- -OFTEN SEVERE
- -RESPONDS WELL TO MEDICATION

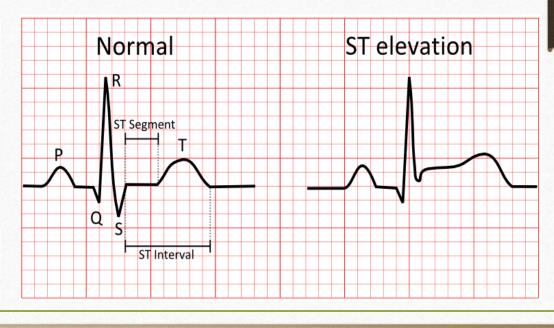


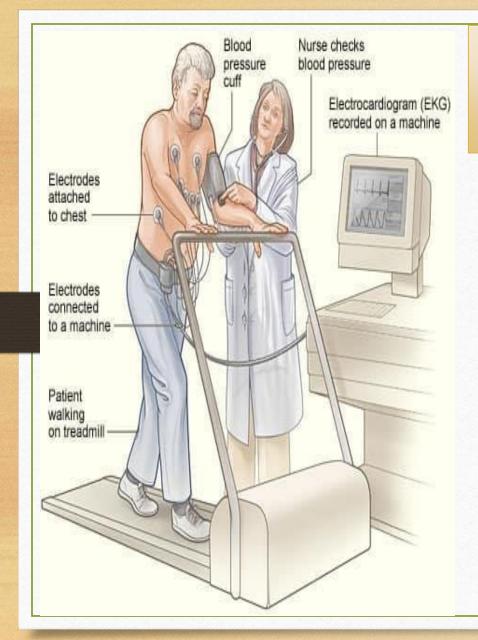
1.ELECTROCARDIOGRAM.

ECG OF PATIENT WITH OBSTURUCTIVE ANGINA SHOW ST SEGMENT DEPRESSION DURING ATTACKS.

WHILE IN VARIANT ANGINA THERE IS ST SEGMENT ELEVATION.







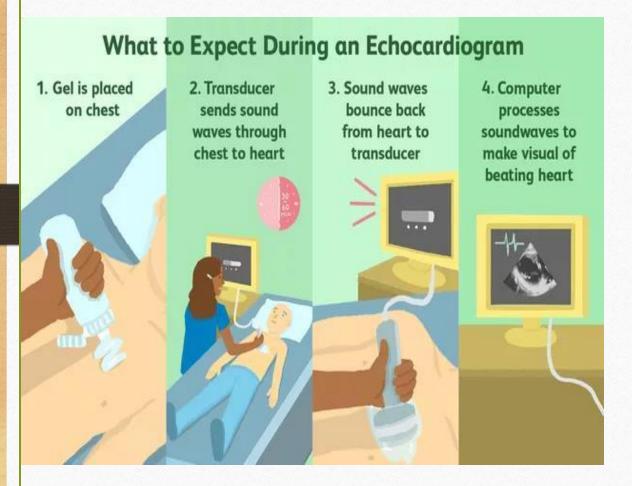
EXERCISE TOLERANCE TEST

-IS PERFORMED USING STANDARD TREADMIL OR BICYCLE

WHILE MONITORING PATIENTS ECG, BP AND GENERAL CONDITION

- -PLANAR OR DOWN SLOPING ST SEGMENT DEPRESSION IS INDICATIVE OF ISCHEMIA
- -UP SLOPING ST DEPRESSION IS LESS SPECIFIC AND OFTEN OCCURS IN NORMAL INDIVIDUALS.
- -ALSO USEFUL IN ASSESSING SEVERITY OF CORONARY DISEASE AND IDENTIFYING HIGH RISK INDIVIDUALS.

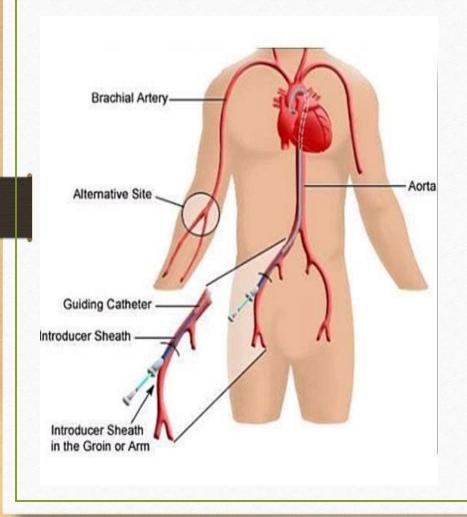
ECHOCARDIOGRAM



-IT IS A TYPE OF ULTRASOUND SCAN USED TO LOOK AT HEART AND NEARBY BLOOD VESSELS -IT USES TRANSTHORACIC ECHOCARDIOGRAPHY TO IDENTIFY ISCHAEMIC SEGMENTS OF MYOCARDIUM AND AREAS OF INFARCTION.

-IT PROVIDES INFORMATION
ABOUT HEART SIZE, APPEARANCE
OF HEART VALVE AND THICKNESS
OF HEART MUSCLE

ANGIOGRAPHY.



-THE PROCEDURE IS PERFORMED UNDER LOCAL ANAESTHESIA AND REQUIRE SPECIALISED RADIOLOGICAL EQUIPMENT, CARDIAC MONITORING AND AN EXPERIENCED OPERATING TEAM.

-IT IS A MEDICAL IMAGING
TECHNIQUE
-IT IS A PROCEDURES THAT USES X-RAY
CONTRAST TO LOOK AT THE BLOOD
VESSESLS TO SEE HOW BLOOD FLOWS
THROUGH ARTERIES.

MANAGEMENT



AIM:

-RELEIVE SYMPTOMS -REDUCE FREQUENCY OF **FUTURE ANGINA** -IDENTIFICATION AND **CONTROL OF RISK FACTOR** -REDUCE RISK FACTOR OF **HEART ATTACK**

1. LIFESTYLE MODIFICATION

-STOP SMOKING AND ALCOHOL -REGULAR EXERCISE **BUT AVOID OVER-EXERTION.** -AVOID STRESS -AVOID LARGE **MEDICATIONS**

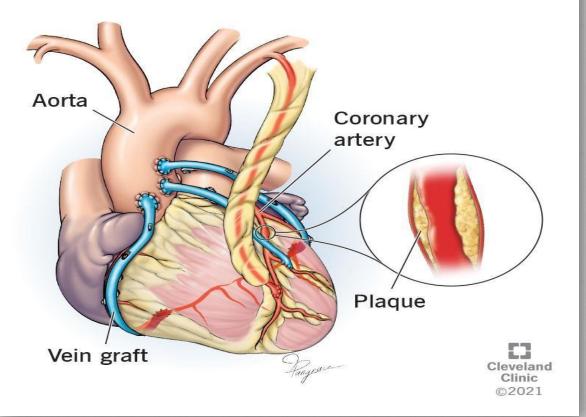


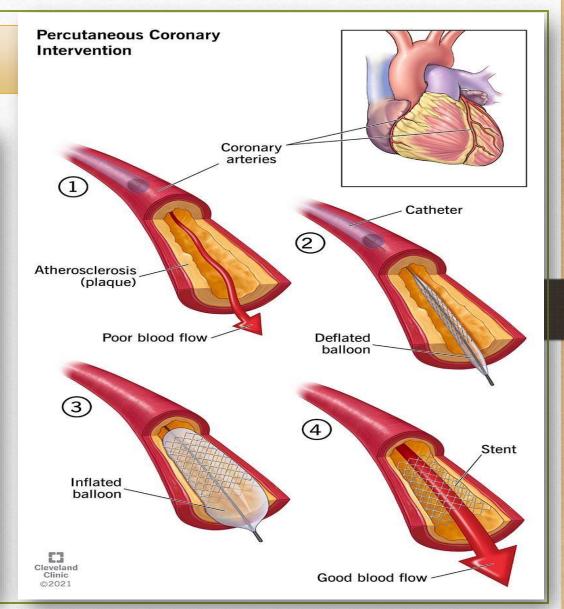
2.MEDICATIONS.

-NITROGLYCERINE [UNDER TONGUE] USED **FOR ACUTE ANGINA ATTACK** -BETA BLOCKERS -CA CHANNEL **BLOCKERS PREVENT RECURRENT ANGINA K CHANNEL ACTIVATORS.**

SURGICAL PROCEDURES.

Coronary artery bypass grafting (CABG)





Homoeopathic Therapeutics.

- 1. CACTUS GRANDIFLORUS
 -SENSATION OF CONSTRICTION IN HEART
 CLASPED AND UNCLASPED AN IRON BAND AND
 THERE IS NO ROOM TO BEAT
 -PAIN ARE OF PRICKING NATURE. IMPEDING
- -PAIN ARE OF PRICKING NATURE, IMPEDING BREATHING AND MOVEMENTS OF BODY, OPPRESSION OF CHEST, DYSPNEA FROM LEAST EXERTION
- -THERE MAY BE DULL HEAVY PAIN AGG BY PRESSURE
- -AGG:BY WALKING, NIGHT, LYING ON LEFT SIDE
 AMEL:AFTER SLEEP, REST, OPEN AIR
- -CONC. BLUENESS OF FACE, HOT HEAD AND ICY COLD COLD FEETS

2.AMYLENUM NITROSUM -GREAT REMEDY FOR ANGINA **PECTORIS** -THERE IS PRECORDIAL ANXIETY, CARDIAC OPPRESSION, STITCHING PAIN, FEELING OF CONSTRICTION IN CARDIAC REGION. -PULSATION FELT OVER ENTIRE BODY -INTENSE THROBBING OF CAROTIDS **ALSO NOTICED** -SENSATION OF SWELLING IN FRONT

OF CHEST AND BURSTING OUT FEELING

IN EARS.

3. DIGITALIS **PURPUREA** -HEART C/O CAUSED BY ALCOHOL, **TOBACCO OR HIGH LIVING** -SUDDEN SENSATION AS HEART WOULD STOP BEATING OF PATIENT MOVE -UNEASINESS IN REGION OF HEART.IRREGULAR INTERMITTENT PULSE GENERALLY OCCURING IN CLIMETRIC AGE -FRIGHTFUL STITCHES IN REGION OF **HEART, COMING ON EVERY 15 MIN** LASTING ONLY 5 OR 6 SEC EACH (ANGINA PECTORIS).

4.CRATAEGUS -EXTREME DYSPNEA ON LEAST EXERTION WITHOUT MUCH RISE OF PULSE. -PAIN IN REGION OF HEART AND UNDER LEFT CLAVICLE.IRREGULAR, FEEBLE, INTERMITTENT PULSE. -THERE MAY BE EXTREME **WEAKNESS, GENERAL** ANASARCA, INSOMNIA, ANAEMIA, **CUTANEOUS CHILLINESS WITH HEART** DISEASE. -AGG: EXERTION, IN WARM ROOM AND **EXCITEMENT**

-AMEL:REST,FRESH AIR

