PATIENT INFORMATION



Coronary Heart Disease

April 2016

CORONARY HEART DISEASE – WHAT IS THAT?

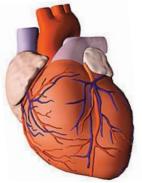


Diagram: www.internisten-im-netz.de

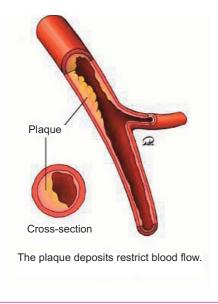
DEAR PATIENT,

Your doctor has diagnosed you as having a chronic coronary heart disease (CHD). This is a serious disorder which remains with you throughout your life. If treated properly, however, you can live a life similar to that of a healthy person.

WHAT CAUSES A CHD?

A coronary heart disease is caused by narrowing of the coronary arteries. Their name is derived from the corona these vessels form around the heart. They supply the heart with blood which transports vital oxygen.

The narrowing is caused by fat and calcium deposits on the inside walls of the coronary arteries (*plaque*). One consequence is that the heart is no longer supplied with enough oxygen. Particularly during physical exertion it is no longer able to transport enough blood around the body, and this leads to complaints.



RISK FACTORS FOR A CHD

A number of factors can trigger the onset of a coronary heart disease. There is an elevated risk for your coronary arteries:

- if you smoke
- if you don't exercise enough
- if you have an unhealthy diet or are overweight
- if your blood lipid concentration is not good
- if you suffer from a sugar disease (diabetes)
- if you have high blood pressure
- if you are under emotional strain

COMPLAINTS

The complaints associated with a coronary heart disease are not constant. In the course of this disorder, however, there may be repeated episodes of complaints that can vary in intensity.

You may experience the following:

- pain behind the breast bone, which frequently radiates out into the throat, jaw, arms or upper abdomen
- shortness of breath, respiratory distress
- sweating or nausea
- a feeling of being threatened

The term *angina pectoris* is used to describe a seizurelike feeling of tightness or pain in the chest which is normally triggered by physical exertion or stress.

A coronary heart disease can lead to further severe disorders like heart attack, cardiac arrhythmia or myocardial insufficiency and thus become life-threatening. You should, therefore, talk to your doctor about what to do in an emergency. Your family members should be informed about this, too.

PATIENT INFORMATION

Coronary Heart Disease

TREATMENT

You can't heal a coronary heart disease. However, the right treatment can help you to live well with this condition. Treatment has two goals: to alleviate complaints and to prevent dangerous consequences like heart attacks.

The most important thing in any treatment is a healthy lifestyle. This means plenty of exercise, a balanced diet and, if possible, no smoking. Moreover, a coronary heart disease can be treated with medication alone, stents or surgery.

There are some medications you should definitely take whether you suffer from these complaints or not. Reliable trials confirm that they can prolong the life of some patients:

- Platelet aggregation inhibitors prevent blood platelets from being deposited on the walls of the coronary arteries.
- **Statins** have a positive impact on blood lipids. Less plaque builds up on the inside walls of the arteries.

Beta-blockers, ACE inhibitors and other medications may also be prescribed for some patients.

If the complaints cannot be sufficiently alleviated with medication, your doctor may insert stents. Stents are thin, wire-mesh tubes which secure a passage through restricted blood vessels. Patients often experience rapid relief but stents do not prolong life. You will still have to take your medication.

Your doctor can bridge narrowed blood vessels by heart surgery using arteries from your body or artificial tissue for the bridging procedure (*heart bypass*).

In some cases, this can help to prevent heart attacks and patients live longer. This has been confirmed by reliable studies. However, the surgery itself involves major side-effects and there may be a higher incidence of strokes afterwards. Sometimes, it doesn't offer any benefits like, for instance, when only one vessel is restricted. You will still have to take your medication.

WHAT YOU CAN DO

- try to stop smoking
- play a sport and keep moving
- pay attention to your diet
- take your medication regularly as prescribed by your doctor
- have your blood pressure, blood sugar and, if necessary, your blood lipids checked regularly
- have the annual flu vaccination, ask your doctor about the pros and cons
- talk to other people and tell the people with whom you are in daily contact about your illness

In patient training courses you learn how to put these tips into practice. You can also attend a special coronary heart disease management programme (abbreviation: DMP KHK). The goal is to coordinate treatment by your doctor and specialists. Talk to your doctor about this option.

MORE INFORMATION

This Patient Information is based on the latest scientific findings and encompasses the important points from the Patient Guideline "Chronic Coronary Heart Disease": www.patienten-information.de/patientenleitlinien

The Patient Information was prepared as part of the Programme for National Care Guidelines. It has the backing of the Germany Medical Association, the National Associations of Statutory Health Insurance Physicians and the Association of Scientific Medical Societies.

Methodology and Patient Information "Coronary Heart Disease - What to do in an emergency": www.patinfo.org

Contact to self-help groups

You can find out from NAKOS (national contact and information office for the encouragement and support of self-help groups) where there is a self-help group in your area: www.nakos.de, Tel.: 030 3101 8960

DOI: 10.6101/AZQ/000291

Responsible for the content:
German Agency for Quality in Medicine (ÄZQ)
Joint institution of BÄK and KBV
Tel.: 030 4005-2501 • Fax: 030 4005-2555
Email/Contact: mail@patinfo.org
www.patinfo.org
www.aezq.de

With the compliments of

