The Royal Liverpool and Broadgreen University Hospitals

NHS Trust



Patient information

Angina

Cardiology Directorate

Royal Liverpool Hospital and Broadgreen Hospital

PIF 069 / V4

The heart is a powerful muscle (known as the myocardium) that pumps blood around the body. For the heart muscle to keep working effectively it needs to receive a blood supply and it gets this from the coronary arteries (these are blood vessels which carry oxygen-rich blood).

The heart has three main coronary arteries (the left and right coronary arteries and the circumflex artery) and each of these divides into many branches to cover the whole of the surface of the heart.

Angina (angina pectoris) is a discomfort or pain, mainly in the chest, arms, neck or jaw, that may occur when part of the heart muscle is not receiving enough blood (and so not enough oxygen). This happens because the coronary arteries become furred up by a build-up of fatty deposits (atheroma), which narrows the amount of space through which the blood has to flow. The disease process is called atherosclerosis or 'hardening of the arteries'.

Angina is usually a symptom of coronary heart disease and occurs when the heart wants more blood.

Any exertion (physical or mental) makes the heart work harder and increases its demand for blood and oxygen, for example, rushing for the bus, walking uphill, heavy housework, gardening, mental or emotional stress, excitement, eating a heavy meal or cold weather.

Because the arteries are narrower than they should be, sometimes not enough blood can pass through them to meet the increased demands, and it is then that the angina may occur.

The pain or discomfort is often hard to explain but words commonly used are 'tightness', 'heaviness', 'squeezing', 'aching' and 'dull' - sometimes it is like indigestion. In some people, the only symptom is shortness of breath.

Obviously everyone is different - some angina pain may not come under any of these descriptions and the severity of pain or discomfort can vary. Angina normally eases off within ten minutes if you have a rest or use a GTN (nitrate) spray.

Angina can be treated and there are many tablets available to do this. However, your doctor will have to find the right combination of tablets for you. If you do need more treatment, you will be given information about this.

There are risk factors which make people more likely to develop angina.

These are:

- High cholesterol (fat) levels in the blood.
- Smoking now or in the past.
- Diabetes, whether you need tablets or insulin, or need to follow a special diet.
- High blood pressure.
- A family history of angina or heart attack.

The more of these risks you have, the greater the risk you have of developing heart disease.

The more you smoke and the longer you have done so, the higher the risk.

Most people who suffer from angina live full lives with the help of modern treatment. However, the success of this also depends on you.

Health professionals need you to co-operate with them and you need to be prepared to change your lifestyle if you have risk factors for heart disease that can be changed.

If you have an episode of angina, stop what you are doing and sit down. If you have your GTN spray or tablets, use them.

- If the pain does not ease within five minutes, repeat the spray or tablets again.
- If the pain continues, repeat the GTN after five minutes.
- If the pain still continues after 20 minutes, phone 999 for an ambulance.
- If you feel sick, breathless, dizzy or sweaty, you should phone 999 for an ambulance immediately.

If you find that you get angina after eating a meal, you may find it helpful to eat smaller meals more regularly.

Many people with angina have 'stable angina' where the episodes of angina happen after a certain amount of exercise. However, if your angina becomes more regular, or is coming on when you are resting, this may be what we call 'unstable angina' and you must let your doctor know as you may need more urgent treatment.

What is the difference between angina and a heart attack?

In a heart attack, the narrowed blood vessel becomes totally blocked by a blood clot. No blood can get through to that part of the heart muscle. The heart will be damaged unless the blood vessel is reopened within a few hours.

Further Information

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| Text | phone | nur | nber: | 18001 | 0151 | ١ | | |

NHS website www.nhs.uk

NHS Direct: 0845 46 47
For free advice and information on any health

matter, 24 hours a day, seven days a week.

British Heart Foundation www.bhf.org.uk Heart helpline 0300 330 3311 e-mail:heartmatters@bhf.org.uk

Author: Cardiology Directorate Review Date: November 2016 All Trust approved information is available on request in alternative formats, including other languages, easy read, large print, audio, Braille, moon and electronically.

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