

Sudden chest pain: What is angina pectoris?

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That feeling of crushing pain in your chest can be a medical emergency, but it can also be angina pectoris, or "stable angina"—a symptom of coronary heart disease that can be managed with medication.

Angina can be stable, unstable, variant or refractory, so it's important for people having [chest pain](#) to see a doctor to determine what needs to be done.

"It turns out, there are lots of different kinds of chest pain. In fact, almost everything in the chest can hurt in one way or another. Some of the causes are really nothing more than a minor inconvenience. Some of them though are quite serious, even life-threatening," [Dr. Alan Greene](#) said recently about [stable angina](#), noting chest pain can be caused by everything from asthma to a blood clot in the lungs.

What is angina pectoris?

Stable [angina](#) typically happens because of narrowing or blockages in the arteries that are not providing the [heart muscle](#) with the blood it needs, according to the [American Heart Association](#) (AHA).

It's the most common type of angina and has a regular pattern, according to the [U.S. National Library of Medicine](#) (NLM).

Conversely, unstable angina can be a sign of an imminent heart attack. In this case, the pain doesn't follow a pattern or stop with rest and medication, according to the NLM.

Variant angina happens when someone is at rest and can be treated with medications, according to the NLM. A person with refractory angina may have frequent symptoms despite [lifestyle changes](#) and medication, according to the [Mayo Clinic](#).

What causes angina pectoris?

Coronary heart disease is behind angina. That condition is due to reduced blood flow because of plaque growth from waxy cholesterol

sticking to the walls of the coronary arteries, according to the [AHA](#).

Arteries can narrow over time or be blocked by a clot if plaque ruptures and breaks off suddenly.

Angina pectoris symptoms

Angina can feel different for men than for women. Some symptoms include a feeling of squeezing or pain in the center of the chest or discomfort in the neck, jaw, shoulder, back or arm, according to the AHA.

Angina can cause feelings of chest pain and arm numbness, according to the [Texas Heart Institute](#) in Houston. The pain may spread.

Women may instead have nausea, vomiting, abdominal pain or feel out of breath, the AHA [noted](#). That's because they're more likely to have microvascular disease in the small arteries.

Triggers may include exercise, [emotional stress](#), heavy meals, smoking, and very hot or cold temperatures, according to AHA.

Angina is considered stable if frequency, length and responsiveness to medicine stays the same for two months, the Mayo Clinic said.

More alarming is new chest pain or a change in pattern. This may signal unstable angina with symptoms that include worsening pain that may last longer or isn't relieved by rest or medication, according to the Mayo Clinic.

Someone experiencing this should immediately seek [medical care](#).

Angina pectoris treatment

Treatment can include lifestyle changes, medication and surgery.

Rest and the medicine nitroglycerin, which relaxes the arteries and increases blood supply, can ease chest [pain](#), according to the AHA.

Beta blockers and [calcium channel blockers](#) help reduce the heart's workload, while angiotensin-converting enzyme (ACE) inhibitors and angiotensin II receptor blockers lower blood pressure, according to the AHA.

Statins may be used to treat underlying high cholesterol levels. Anti-clotting medication, such as aspirin, may also be prescribed.

An anti-angina medication called ranolazine may also help, according to the Mayo Clinic.

Surgical options are angioplasty and stenting, which involves widening an artery with a balloon and then inserting a metal tube to keep it open, according to the Mayo Clinic.

A study published recently in the journal [Circulation](#), found overall risk of death to be similar for simple angina whether treatment included surgery or medications and lifestyle interventions.

"If a patient with mild angina controlled by [medical therapy](#) wants these narrowings [of arteries] 'fixed,' which some patients do, it's very reasonable to go ahead and do that because they're not going to be harmed," lead researcher [Dr. Judith Hochman](#), director of the Cardiovascular Clinical Research Center at the NYU Grossman School of Medicine in New York City, [said](#) when the study was released.

"The same is true for a conservative strategy," Hochman added. "There are many patients that just don't want invasive procedures."

Treatment for [unstable angina](#) can include angioplasty and stenting or coronary artery bypass graft surgery, according to the AHA.

The latter surgery bypasses a blocked artery by using a piece of healthy blood vessel from another part of the body, according to [Johns Hopkins Medicine](#). Both the traditional open heart surgery or less invasive methods may be used.

How to prevent angina pectoris

Johns Hopkins Medicine recommends maintaining a healthy lifestyle to prevent [angina symptoms](#).

Lifestyle changes can include eating a healthy diet, with limited sugar, salt and saturated fat.

Exercise using a safe plan developed with your doctor, lose excess weight and quit smoking, the Mayo Clinic suggests.

Manage medical conditions such as diabetes, high blood pressure and high cholesterol, Mayo Clinic recommends. This includes taking medications as prescribed, Johns Hopkins Medicine notes.

Manage stress and work toward a healthy weight, Johns Hopkins suggests.

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