

Chest pain

WHAT IS CHEST PAIN?

Chest pain is any pain that is felt in the chest. Chest pain may come from many parts of the chest including:

- the heart
- the lungs
- the oesophagus (food pipe)
- muscles
- bones – including your ribs and sternum (breastbone)
- the abdomen (stomach) – the pain is felt as being in the chest due to a complex network of nerves and skin.

All chest pain is considered to be heart-related until proven otherwise.

WHAT CAUSES CHEST PAIN?

There are several common causes of chest pain. Some include:

- indigestion or reflux (stomach acid coming up the oesophagus), which can feel like a burning pain in the chest (this common problem can be made worse by smoking, alcohol, coffee, fatty foods and some medications; it often goes away quickly with antacid medication or milk)
- muscle strains
- inflammation in the spaces between the ribs, near the breastbone (costochondritis)
- shingles (herpes zoster) – this can cause chest pain before a skin rash develops
- chest infections such as pleurisy (inflammation of the tissue lining the lungs), bronchitis and pneumonia
- angina or heart attack due to a blockage of blood flow to the heart
- pulmonary embolism – a blood clot in the lung
- aortic dissection- a tear in the inner layer of main artery (aorta).

WHAT SHOULD YOU DO IF YOU HAVE CHEST PAIN?

Many Australians die of a heart attack because they do not know the signs or wait too long to seek help.

Chest pain that lasts more than 10 minutes (at rest) needs to be promptly investigated by a doctor.

If this happens phone triple zero (000) and ask for an ambulance.

New treatments for heart attack can save lives and prevent serious heart damage. Most need to be given early to be effective, making it even more important to seek help early.

TREATMENT

Before treatment can begin, the cause of the pain must be found. There is a range of tests and treatments you may need while in the emergency department or urgent care centre:

- an ECG (electrocardiogram) –a quick and painless test used to get a 'picture' of the electrical activity within the heart
- blood tests to measure chemical markers from the heart and other organs
- a chest x-ray to look at the lungs, heart and major blood vessels in the chest
- other imaging studies to look at structures in the chest, such as CT scans and angiograms (pictures of your blood vessels)
- medication to relieve pain and dilate (widen) the blood vessels of the heart to allow the blood to flow more effectively. Some medications may be given intravenously (through a 'drip' inserted into a vein).

Tests help to determine the cause of the chest pain (or rule out a heart attack). Your doctor will let you know which tests are needed. You may be in the emergency department or urgent care centre for several hours because it can take time for the results of some tests to be available and is important for an accurate diagnosis. If you do present to an urgent care centre, you may be transferred to an emergency department.

You may be referred for further tests as an outpatient or to a cardiologist (heart doctor) or another specialist depending on the cause of your chest pain.

WHAT TO EXPECT

It is not always easy to diagnose the cause of chest pain; however, your doctor will have tried to rule out serious causes. If your symptoms return or worsen, you should go back to your doctor. In particular, if you experience further unexplained chest pain, return to the hospital emergency department or urgent care centre, by ambulance if necessary. Do not drive yourself.

Your local doctor will also need to see you for a follow-up check, and further tests may be needed. Even if you are feeling well, make an appointment to follow up with your doctor in the next week.

WAYS TO REDUCE YOUR RISK OF A HEART ATTACK

Your chance of having a heart attack is increased by smoking, lack of exercise, high blood pressure, obesity, high cholesterol, diabetes and a family history of heart disease.

The risk is higher in men and increases as you get older. It is important to remember that people without risk factors can also have heart disease.

There are several measures that can reduce your risk of heart attack.

Stop smoking – call Quitline for help and support.

- Exercise – engage in moderate physical activity for 30 minutes or more, five days a week. A brisk walk is a good way to start.
- Eat a diet low in fat – including fish, cereals, grains, fruit and vegetables. Look for the Heart Foundation tick when choosing foods or discuss your eating with a dietician.
- Maintain a healthy weight – see your doctor or a dietician for advice.
- Regular check-ups with your local doctor. Take all prescribed medications as directed. Do not stop your medication unless advised by your doctor.

What are the symptoms of a heart attack?

Symptoms vary from person to person. Some people have few symptoms or none at all. Older people often do not experience chest pain when having a heart attack. Symptoms include:

- pain in the centre of your chest or behind the breastbone – it may be crushing, burning, squeezing or like heavy pressure on the chest
- pain that spreads to the shoulders and arms, hand, neck, throat and jaw
- sweating and being pale in colour
- feeling anxious, dizzy or unwell
- a sick feeling in the stomach (nausea or vomiting)
- being short of breath.

If you develop these symptoms, call an ambulance (dial triple zero (000)). Do not drive yourself to hospital. Then:

- stop and rest quietly by sitting or lying down
- have half an aspirin straight away (unless your doctor has told you to avoid them)
- wait for the ambulance – it has specialised staff and equipment that may save your life.

With a heart attack, every minute counts. The faster a person gets treatment, the better.

If you have any doubt about your chest pain, call an ambulance.

Seeking help

In a medical emergency call an ambulance – dial triple zero (000).

For other medical problems or any concerns see your local doctor or healthcare professional.

For health advice from a registered nurse you can call NURSE-ON-CALL 24 hours a day on 1300 60 60 24 for the cost of a local call from anywhere in Victoria.*

NURSE-ON-CALL provides access to interpreting services for callers not confident with English.

* Calls from mobiles may be charged at a higher rate.

WANT TO KNOW MORE?

- Ask your local doctor or healthcare professional.
- Visit the Better Health Channel at www.betterhealth.vic.gov.au.
- Contact the National Heart Foundation on 1300 36 27 87 or www.heartfoundation.com.au
- Contact Quit on 131 848 (Quitline) or www.quit.org.au

To receive this publication in an accessible format phone 9096 7770, using the National Relay Service 13 36 77 if required, or email

emergencycare.clinicalnetwork@safercare.vic.gov.au

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