



 Please call 911 if you think you have a medical emergency.

## Angina Pectoris Treatment

The treatment for angina depends on the severity of the symptoms and the results of tests that are done to find the underlying cause.

### Self-Care at Home

Stop doing whatever it is that causes your symptoms and call 911. Immediate help and intervention is your best chance for survival if you are having a heart attack or other serious problem.

- Lie down in a comfortable position with your head up.
- If you have regular adult aspirin or its equivalent, chew one (as long as you are not allergic to aspirin). Chewing more than one will not do any good and may cause unwanted side effects.

If you have had angina before and been evaluated by your health care provider, follow his or her recommendations.

- This may mean rest, and the immediate use of sublingual nitroglycerin.
- It may include a visit to the hospital emergency department.

### Medical Treatment

If you have come to the hospital emergency department, you may be sent to another care area for further testing, treatment, or observation. On the basis of your provider's preliminary diagnosis, you may be sent to the following units:

- An observation unit pending test results or further testing
- A cardiac care unit
- A cardiac catheterization unit
- The operating room for emergency cardiac bypass surgery

Regardless of where you are sent, several basic treatments may be started. Which are given to you depends on the severity of your symptoms and the underlying disease.

- You will have at least one intravenous line started. This line is used to give medication or fluids.
- You will probably be given an aspirin if you haven't already taken one.
- You may be given oxygen through a face mask or a tube in your nose. This will help you feel better if you are having trouble breathing or feeling uncomfortably short of breath by raising the oxygen content of your blood.

Treatment will depend on the severity of your symptoms, severity of the underlying disease, and extent of damage to the heart muscle, if any.

- Simple rest and observation, an aspirin, breathing oxygen, and sublingual nitroglycerin may be all that you need, if it is only angina.
- You may be given medication to reduce anxiety or to treat pain.
- You may be given medication to lower your blood pressure or your heart rate. Beta blockers, Angiotensin Converting Enzyme Inhibitors (ACE inhibitors), and cholesterol-lowering drugs (statins) are commonly given if the chances of a heart attack are likely.
- You may be given medication to reduce your risk of having a blood clot or to prevent further clotting.
- If the health care provider believes your chest pain actually represents a heart attack, you may be given a powerful "clot-buster" medication called a fibrinolytic.

After reviewing your immediate test results, the hospital health care provider will make a decision about where you should be for the next hours and days.

- If you are feeling better, your condition is stable, and this was only an angina attack, you may be allowed to go home. You may be given medications to take. You will be told to follow up with your primary care provider within the next day or two.
- If you keep having symptoms or your condition is unstable, you will be admitted to the hospital. You will probably undergo further tests and possibly coronary angiography, coronary artery angioplasty, or even coronary artery bypass surgery, if all your arteries are critically blocked.

Angioplasty is a treatment used for people whose angina does not get better with medication and/or who are at high risk of having a heart attack.

- Before angioplasty can be done, the area(s) of coronary artery narrowing is located with coronary arteriography.
- A thin plastic tube called a catheter is inserted into an artery in the arm or groin with local sedation. The catheter has a tiny balloon attached to the end.
- The catheter is threaded through the arteries and into the artery where the narrowing is.

- The balloon is inflated, opening up the narrowing.
- This is not a permanent solution for most people. Many require placement of a "stent," a small metal sleeve that is placed in the narrowed artery. The stent holds the artery open.

If you have had angina symptoms and are visiting your primary care provider for evaluation, he or she will make a decision about how to proceed with the evaluation. The choices include going ahead with the evaluation on an outpatient basis, referring you to a specialist in heart disorders (cardiologist), or admitting you to the hospital for further workup.

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For more information, read the complete article, Angina

(<http://www.emedicinehealth.com/seein/art.asp?articlekey=5886> <http://www.emedicinehealth.com>.)

WebMD Medical Reference from eMedicineHealth

Reviewed by Ann Edmundson, MD on May 24, 2006

Last updated: May 24, 2006

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