

ATHEROSCLEROSIS & ANGINA

with Ellen Hillegass, PT



WHAT IS IT?

- Atherosclerosis is the build up of plaque on the endothelium of ANY artery in the body.
 - Plaque = LDL cholesterol, clotted blood cells
- Angina is the symptom of ischemia in arteries. Ischemic responses occur with 70% blockage in coronary arteries.
 - Ischemia in coronary artery = coronary artery disease (CAD)
 - Ischemia in carotid artery = transient ischemic attack
 - Ischemia in femoral artery = intermittent claudication
- Myocardial infarction (MI) aka "heart attack"
 - Complete blockage with 100% occlusion in coronary artery
 - Injury done to cardiac muscle
 - Complete blockage to brain = cerebrovascular accident
- Risk factors: hypertension, diet elevated in saturated fat and LDL cholesterol, smoking, family history of CAD, diabetes, sedentary lifestyle

SPECIAL TESTS



- Angina - present during exertion/activity and goes away with rest
- Confirmation of diagnosis using an exercise stress test
 - Performed by a physician
- Persisting angina with symptoms coming on earlier with activity and wakes patient up at night = signs of impending myocardial infarction
- MI can be determined by 2/3 findings
 - Symptoms
 - ECG
 - Changes in enzymes

DIFFERENTIAL DIAGNOSIS

- Esophageal reflux/epigastric pain
 - Mimic chest discomfort
 - Does not occur with exercise
 - Goes away with rest
- Costochondritis/ muscle ache
 - Chest wall discomfort from palpation
- Taking a deep breath
 - If painful, not angina



TREATMENT EXAMPLES



- Assist with lifestyle changes
- Exercise, aerobic program
- Education
 - Diabetes
 - Dietary changes
 - Hypertension
 - Quitting smoking

WORDS OF ADVICE FOR THE NPTE?

- Try to put cases together of patients with different cardiopulmonary conditions
 - i.e. a patient with an esophageal issue verses a patient with a cardiac issue
 - Compare and contrast the patients

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