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 – the pain is referred to the chest due to a complex network of nerves
- 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.

- **Indigestion** or **reflux** (stomach acid coming up the oesophagus) 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** and **inflammation** in the spaces between the ribs, near the breastbone (**costochondritis**).
- **Shingles** (**herpes zoster**) can cause chest pain before a skin rash develops.
- **Chest infections** such as **pneumonia** (inflammation of the tissue lining the lungs), bronchitis and pneumonia.
- **Angina** is caused by poor blood flow to the heart. It usually occurs when the heart has to work harder than usual. Many people with **coronary artery disease** (or blocked heart blood vessels) experience angina. This often happens with exercise, high emotion or distress, cold weather or after eating a large meal. The pain is short-lived and eases when you rest. If pain does not go away with rest, this may indicate a heart attack.
- **Heart attack** chest pain can also be due to a sudden blockage of a **coronary** (heart) artery.

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 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 early help.

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.

- An **ECG** (**electrocardiogram**) – a test used to get a ‘picture’ of the electrical activity within the heart. It is quick and painless.
- **Blood tests** – to measure 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.
- **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).

Your doctor will advise you which tests are needed.

You may be referred for further tests as an outpatient or to a **Cardiologist** (heart doctor).

Home care
In the first few days at home, try to take it easy. Rest if you feel tired. Slowly increase your activity as you are able. If you feel well, there is no need to limit work or strenuous activity (including sex).

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 come back or worsen, you should seek an urgent review. In particular, if you experience further unexplained chest pain, return to the hospital emergency department, by ambulance if necessary. Do not drive yourself. Your local doctor will 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 certain foods.
• **Maintain a healthy weight** – see your local doctor.
• **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?

- 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 may spread 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.

Symptoms vary from person to person. Some people have few symptoms or none at all.

If you develop these symptoms, call an ambulance (dial 000), 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)
- do not attempt to drive yourself to hospital
- wait for an ambulance - it has specialised staff and equipment that may save your life.

With a heart attack, every minute counts. Do not wait. The faster a person gets treatment, the better.

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