

In a Heartbeat

A project of the

Maine Quality Forum

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Frequently Asked Questions And Answers – Heart Attack

The following are questions that may typically arise during a session regarding heart attack:

1. How would I know if I were having a heart attack?

It's not always easy to tell, but the pain is often described as pain, pressure, tightness or heaviness. These are the symptoms: chest pain or discomfort, pain or discomfort in the jaw, neck or back, feeling weak, lightheaded or faint, pain or discomfort in the arms or shoulders, and/or shortness of breath. It may be only one or it may be several. When in doubt, do not wait, call 9-1-1 right away!

2. What is angina and how is it different from a heart attack?

Angina is NOT a heart attack. It is a type of chest pain that occurs when there is not enough blood flow to the heart. This is often a result of narrowing of the blood vessels that supply blood to the heart.

Stable angina occurs at fairly predictable times, usually with activity or physical exertion, such as snow shoveling or climbing stairs. It is usually relieved by rest or by taking prescribed medication, and may continue without much change for years. Stable angina develops after a predictable amount of exertion or emotion and usually lasts 1 to 5 minutes.

Unstable angina is chest pain that occurs at rest or with less and less exertion; the pain may become severe and last longer and it may not respond to nitroglycerin or rest. Unstable angina is a change from stable angina—a pattern of predictable chest pain that is relieved by rest. Unstable angina is a warning sign that blood flow to the heart has become more impaired and that a heart attack may soon occur. Unstable angina requires immediate medical evaluation.

People who have angina are at greater risk of a heart attack than those who do not. What they need to keep in mind, is that angina pain lasts **less than** 5 minutes. Pain lasting longer than 5 minutes is a sign of a heart attack. Whether you have angina or not, never wait longer than 5 minutes to call 9-1-1.

3. Do I have to have all of the heart attack signs before calling 9-1-1?

No! We have talked about the most common signs, and any one of them, or any combination of them is reason to call 9-1-1 immediately. Don't try to diagnose yourself or someone else - that is what medical professionals are there for. Your job is to call 9-1-1 right away so that you get the best care possible.

4. I'd rather wait until I'm sure something's really wrong. Why the hurry?

Clot-busting drugs and artery-opening treatments work best when given within the first hour after heart attack symptoms begin. The first hour is also the most risky time of a heart attack – it's when your heart may stop suddenly, so reacting quickly to symptoms really improves your chance of survival and recovery.

5. Exactly how quickly should I act?

Call 9-1-1 immediately. Never wait more than 5 minutes!

6. Why bother? There's not much I can do about it anyway, right?

There IS something you can do about a heart attack! Doctors can deliver drugs and perform procedures that can stop or reverse a heart attack, and/or limit the damage to the heart muscle, but only if you get to them quickly. Given that these new therapies are available, it is very unfortunate that many people are still not

receiving them because they delay too long in seeking medical care. The greatest benefits are gained when the therapies are delivered early!

7. I don't want to cause a commotion. Can't I just have my spouse, friend, or coworker take me to the hospital?

Emergency Medical Personnel (also called EMS) bring medical care to you, such as oxygen and medications. They can contact the hospital before you get there so the hospital is ready for you. And they can actually restart someone's heart if it stops after they arrive – your spouse, friend or coworker cannot likely do that, nor can they help at all if they are tasked with driving to the hospital. In an ambulance, there are plenty of people to give you the help you need and get you to the hospital quickly.

8. I am worried about being able to pay for the cost of the ambulance. What happens if I don't have insurance, or can't pay my bill?

The costs for ambulance services may differ from community to community, and depend on the level and type of medical treatment that you receive. The most important thing for you to know, is that the ambulance crew is there to help you, whether you feel that you can pay for the service or not. You may be asked to provide insurance information to the emergency service providers, however the service will not deny you transportation to the hospital if you don't have insurance. Although it can be stressful to think about having to pay for these services afterward, **don't let it stop you from calling 9-1-1 for help**. Payment plans and/or financial assistance are usually available for patients who cannot pay the full cost of the ambulance service. Your survival and health may depend on that call!

9. I don't think I can remember all of this. How can I make it easier for me?

You can make a plan and discuss it with your family, friends, coworkers, and of course your doctor. Keep it simple – know the warning signs, and be sure that everyone knows that **calling 9-1-1** is the quickest and best way to get you and/or your loved ones the help needed.

10. I carry nitroglycerin pills for my heart condition. If I have heart attack symptoms, shouldn't I try them first?

Yes, if your doctor has prescribed nitroglycerin (NTG) pills, you should follow his or her orders, which are usually to take 1 dose under the tongue and let it dissolve (do not swallow it). If symptoms do not improve or if symptoms worsen after 5 minutes call 9-1-1 before taking any more NTG.

If symptoms do improve you can take an additional dose every five minutes for a maximum of three doses. If symptoms have not resolved within 5 minutes after taking the 3rd nitroglycerine pill, call 9-1-1 immediately.

11. What about taking an aspirin like we see on TV?

You shouldn't delay calling 9-1-1 to take the aspirin. Sometimes people delay contacting emergency care because they think the symptoms will go away, and unfortunately precious time is wasted.

If you have aspirin available, and are not allergic to it, CHEW (do not swallow) one adult aspirin (325 mg), OR four low-dose aspirin (81mg each) AFTER you call 9-1-1.

NOTE: If you take aspirin regularly, and have already taken 325 mg during the day, do NOT take any more.