

# Letter to the Editor: The Pundit Speaks

By Randolph M. Howes, M.D., Ph.D.

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## “Chest Pain Should Be Taken Seriously”

Heart disease is your greatest health threat and is a greater danger than breast cancer in women and prostate cancer in men. According to the American Heart Association, more than 15 million people have heart disease and it is the leading cause of death in the United States. Most people experience chest pain at some point, but how do you know if it is a heart attack or simply heartburn or anxiety? The discomfort could be caused by other urgent conditions, as well as less serious issues that may point to a chronic medical problem. When it comes to chest pain the usual suspects include coronary artery blockages, high blood pressure, and heart valve or rhythm disorders. But there are plenty of other potential suspects. In the United States, nearly 6% of emergency room patients report chest pain. More than half of those cases involve non-cardiac chest pain, or NCCP, that is caused by heartburn, anxiety or other issues. A staggering 80% of patients who complain of chest pain during primary care visits are simply experiencing NCCP. But, the National Institutes of Health estimates that as many as 25% of emergency room patients with chest pain have acute coronary syndrome (ACS), a condition that reduces blood flow to the heart. These numbers highlight the dilemma for both patients and health care professionals: chest pain must be taken seriously. Here are some signs of a potentially real cardiovascular event that warrant immediate medical attention: mild or severe discomfort in the middle or left side of the chest that feels like fullness, pressure or squeezing; it lasts several minutes, ends, then returns; difficulty breathing, whether during rest or after physical activity; mild or severe chest pain that radiates into arms and neck or shoulders and into the jaws; nausea or severe chest pain that radiates into arms and neck or shoulders and into the jaws; heavy sweating; weakness in limbs, loss of coordination; and all symptoms end and then return, continuing that cycle for several hours. The symptoms of a heart attack tend to increase in severity and duration as they fade and then return. The annoying pressure that may signal the onset of a heart attack can become stabbing pains. Among the many causes of chest pain that do not involve a heart condition, some are emergency situations, while others are chronic conditions that range from serious illness to easily managed ailments. Some of the most common non-cardiac conditions that can feel like a heart attack include heartburn; panic attack; gallbladder disease; peptic ulcer; pulmonary conditions; Boerhaave syndrome (rupture in the esophagus).

In the America that I love, you can potentially control your heart health through diet, exercise and managing stress.

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