

# ADJUSTED FOR LIFE

## CHIROPRACTIC HEALTH CENTRE



ADDING LIFE TO YOUR YEARS

## February 2010 – National Heart & Stroke Month

On Monday, I was cross-country skiing – enjoying the latest snowfall and the chance to be outdoors. As my heart rate increased, I started thinking about how chiropractic (what I do as a profession) is related to heart health.

My first thought was that I hoped everyone survived the double jeopardy of the increased risk of a heart attack associated with both heavy snow shoveling and Mondays. The combination can be particularly lethal for those who aren't healthy.

My second thought was that you can't have a healthy heart in an unhealthy body. In other words, all the things that you do to maintain your overall health – nutrition, sleep, physical fitness - are also important to having a healthy heart.

I was reminded of this as I thought back to a recent conversation with a high school friend. His story was one I've heard numerous times from patients at the clinic. He woke up in the middle of the night with pain in his upper back and chest and some vague discomfort in his left arm. By 3:00 am he was at the emergency ward. An ECG was performed to measure the heart's electrical activity, enzymes were measured to check for heart muscle damage and an MRI was done to make sure that there was no swelling of the heart. Nothing! He later completed a treadmill stress test and passed with no problems.

So why the concern?

Heart attacks are still the leading cause of death in men and women in North America. Every twelve minutes someone in Canada has a heart attack. Every seven minutes a Canadian dies from heart disease or stroke. My friend had at least five of the risk factors associated with having a heart attack. He is slightly overweight, at an age when the risk of heart attacks increases, not as active as he should be, eats a less than pristine diet and holds down a high-pressure executive position in a high-stress industry. Remember you can't have a healthy heart in an unhealthy body. He was smart to seek immediate medical attention.

But his symptoms were not atypical. 99% of people think that chest pain is the major indicator of a heart attack. However, as studies and statistics indicate, symptoms vary with individuals and with gender. The following symptoms are found in both **men and women**:

- Chest discomfort, uncomfortable pressure over the chest
- Fullness of chest
- Squeezing of chest
- Pain in the center of the chest
- Spreading pain to inner side of left arm (occasionally right arm)
- Pain over the upper back
- Radiating pain to the jaw
- Radiating pain over the neck region
- Pain or discomfort in the upper part the stomach (epigastric region) (In this condition usually women are misdiagnosed as suffering from gastritis and treated with antacids.)
- Nausea or vomiting
- Sweating
- Chest pain (30% of cases only)

Almost half (43%) of **women** who have had a heart attack experienced no chest pain. Their most frequently reported **early warning symptoms** were:

- Unusual fatigue (70.7%)
- Sleep disturbance (47.8%)
- Shortness of breath (42.1%)

So if my friend was not having a cardiac event, what did he have? Because he is not my patient, I did not offer a diagnosis but I did suggest that it sounded like “pseudo angina” or “false angina”. Pseudo angina has many of the same characteristics as true angina.

#### **Causes:**

Pseudo Angina is mechanical in nature and can arise from degenerative change or dysfunction (aberrant or altered movement pattern) in the lower neck or upper back and corresponding ribs. It can be caused from inflammation of the joint capsule, nerves or trigger points in the intercostal, scalene or serratus musculature. When these tissues are challenged by increased activity like snow shoveling or sitting with bad posture you can get Pseudo Angina. The symptoms can be very similar to those seen when you have an actual heart attack. Untreated problems in these regions often results in needless pain and anxiety.

#### **Symptoms of Pseudo Angina**

If the underlying problem is with the ribs, there is often discomfort and even sharpness when taking a deep breath. The pain can often be recreated by palpation or movement of the neck or upper back irritating the involved tissue. A distinguishing feature from a cardiac event is that typically there is not sympathetic, nervous system involvement so it is not accompanied by sweating and nausea. Also pseudo angina is not relieved by taking nitroglycerin. It is important

to rule out a cardiac event by immediately seeking medical attention if you or someone you know is experiencing chest pain. If it is pseudo angina, then chiropractic is the treatment of choice.

**Treatment:**

Restore normal function to the involved area with chiropractic adjustments or decompression treatment. Soft tissue treatment like massage, acupuncture or modalities of current or heat may help as well. It is also important to manage the inflammation. An additional consideration is correcting posture with awareness, exercise and proper workstation setup.

**Prevention:**

The heart is under the control of the nervous system. More specifically its function is regulated by the autonomic nervous system comprised of the sympathetic component that originates in the nerves of the upper back and the parasympathetic component from the medulla of the brain, via cranial nerve ten, known as the Vagus nerve.

Movement is critical to maintaining a healthy heart. At the clinic, we treat your injuries and provide maintenance adjustments so you can keep active! Being active helps stress reduction, weight management and flexibility. Remember you can't have a healthy heart in an unhealthy body.

Keep fit. Keep active. Live well!