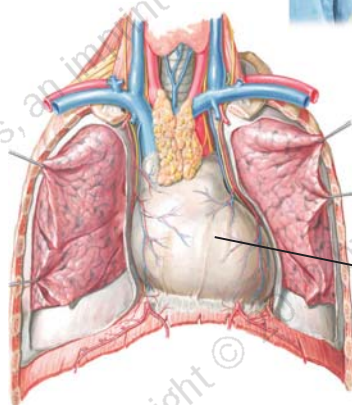


MANAGING YOUR PERICARDITIS

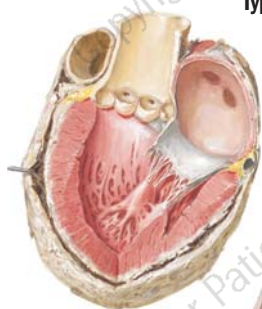
The pericardium, a thin fibrous sac, covers the heart. This sac-like membrane helps hold the heart in place and lubricates it. Pericarditis is inflammation of the pericardium. More men than women are affected, often 20 to 50 years old. Early diagnosis and treatment may prevent complications.



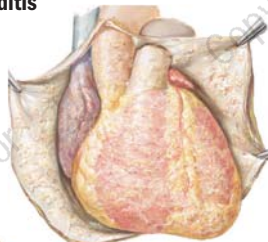
The cause is often a viral infection. Other causes are heart attacks, cancer, radiation, other infections, trauma, drugs, and allergy.

Pericardium of normal heart

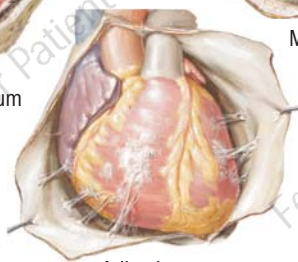
Types of pericarditis



Constricted pericardium



Mild pericarditis



Adhesive pericarditis

Symptoms include chest pain behind the breast bone that may go to the shoulder and neck, like pain of a heart attack. However, unlike the pain from a heart attack, it gets worse when taking a deep breath and is relieved by sitting up and leaning forward. Other symptoms are fever, palpitations, and cough. Constrictive pericarditis can cause legs and abdomen to swell and shortness of breath.



What Is Pericarditis?

The pericardium is the thin fibrous sac that covers the heart. This sac-like membrane helps hold the heart in position in the chest and lubricate the heart. Pericarditis is inflammation of the pericardium. It can be acute (sudden) or chronic (long-lasting). This inflammation may injure the membrane and cause complications. The pericardium can become scarred and thickened and the heart can be constricted (squeezed) (constrictive pericarditis). It may also cause another complication, reduced blood flow from the heart (cardiac tamponade). This occurs when too much fluid collects in the pericardium, so excess pressure on the heart doesn't let it fill correctly. Blood pressure and heart output can fall to dangerous levels. Untreated, cardiac tamponade can cause death.

More men than women are affected, often 20 to 50 years old. Most people recover in 2 weeks to 3 months. Early diagnosis and treatment may prevent complications.

What Causes Pericarditis?

The cause is often a viral infection. Other causes include myocardial infarctions (heart attacks), cancer, radiation, other infections (such as tuberculosis, fungal, and parasitic), trauma, medicines, and allergic reactions. It may have no known cause (idiopathic pericarditis).

What Are the Symptoms of Pericarditis?

Symptoms include sharp chest pain behind the sternum (breast bone) that may go to the shoulder and neck. Some people have dull, achy pain or pressure. Pain worsens with changes in position or with deep breathing. The pain is lessened by sitting forward. A fever may occur if infection is causing the pericarditis. Sometimes people feel palpitations (irregular or rapid heartbeats). Constrictive pericarditis can lead to severe swelling (edema) of the legs and abdomen (belly) and shortness of breath. Reduced blood flow from the heart causes symptoms of heart failure, including problems breathing and swelling in tissues of the legs, feet, or abdomen. The neck veins may also appear distended or very prominent.

MANAGING YOUR PERICARDITIS



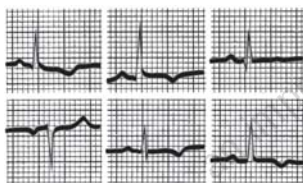
Your doctor makes a diagnosis from your symptoms, physical examination, and tests, including ECG, chest x-ray, echocardiography, and blood tests.



X-ray



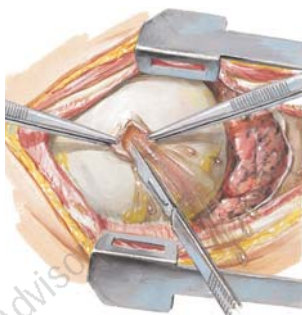
ECG



Treatment focuses on the cause of the inflammation and pain. NSAIDs such as aspirin and ibuprofen are given for pain. In more severe cases, steroidal anti-inflammatory drugs may be used.



Surgery is rarely needed. The doctor cuts a window in the pericardium to let fluid drain out. For cardiac tamponade, the doctor must drain fluid from the sac (pericardiocentesis).



Don't exert yourself until after your symptoms have gone away.



Call your doctor if you have new or worsening chest pain or pain with deep breaths or changes in position.

How Is Pericarditis Diagnosed?

The doctor makes a diagnosis from symptoms, a physical examination, and tests. Electrocardiography (ECG) may show signs of the inflammation. A chest x-ray may show an enlarged heart if fluid collects around the heart. Echocardiography may show fluid in the pericardial sac. Echocardiography is a type of ultrasound examination that uses sound waves to see the heart. The doctor may also order computed tomography (CT) or magnetic resonance imaging (MRI) if complications from pericarditis are suspected. Blood tests may be done to measure inflammation and look for infection.

How Is Pericarditis Treated?

Treatment focuses on the cause of the inflammation and pain. Nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin and ibuprofen are given for pain. In more severe cases, steroidal anti-inflammatory drugs such as prednisone may be used. If fluid in the pericardium affects how the heart works, an operation may be done to release the pressure. A window is cut in the membrane to let fluid drain out. For severe complications such as cardiac tamponade, the doctor must drain fluid from the sac (pericardiocentesis).

DOs and DON'Ts in Managing Pericarditis:

- ✓ **DO** take your medicines as prescribed.
- ✓ **DO** call your doctor if you have new or worsening chest pain or pain with deep breaths or changes in position.
- ⊘ **DON'T** exert yourself until after your symptoms have gone away.

FROM THE DESK OF

NOTES

FOR MORE INFORMATION

Contact the following sources:

- The American Heart Association
Tel: (800) 242-8721
Website: <http://www.americanheart.org>
- American College of Cardiology
Tel: (800) 253-4636
Website: <http://www.acc.org>