Angina is a medical term for a feeling of pain, pressure, heaviness, or numbness that occurs behind the breastbone or across the chest. When the heart muscle doesn’t receive enough oxygen, angina occurs. You may also feel pain in your upper back, neck, jaws, shoulders, or arms. For some women, angina symptoms in the upper back or shoulders can be related to fatigue.

Angina can occur:
- During exercise or other physical activity.
- After you’ve stopped exercising, while cooling down from the physical activity.

With continued rest, pain usually goes away.

A heart attack, on the other hand, occurs when the lack of blood supply to the heart is severe so the heart doesn’t get the oxygen it needs. If the blood flow and oxygen are reduced long enough, the heart muscle can be damaged. (See the chart for the differences between angina and a heart attack.)

**What is an “angina pattern”?**
An angina pattern is the specific way you may experience angina pain. This pattern may be different for each person. For example, one person may feel neck pain while exercising, but it may stop when they stop the activity and rest. For another person, chest pain may occur when they climb the stairs, but won’t usually stop without medication. Angina pain will vary for each person based on:
- What seems to cause it
- How often it occurs
- How severe it is
- Where it is felt
- What it feels like
- How it can be relieved

It’s important for you to be aware of your own usual angina pattern and tell your doctor or other clinician (such as your care manager) if the pattern changes.

**What medication is used to treat angina?**
Nitroglycerin is the most common medication used to manage angina symptoms. It works by relaxing your blood vessels, letting more blood flow to your heart. With more blood flow, your heart receives the oxygen it needs to keep pumping. If your doctor has prescribed nitroglycerin for you, follow these guidelines for proper use:
- Keep the medication with you at all times.
- Don’t carry the container close to your body. Keep it in a cool place, such as a purse, briefcase, or coat pocket.
- Keep your tablets in the original brown container with the container tightly closed. You can also keep the tablets in an approved nitroglycerin carrying case purchased from a pharmacy.
- Don’t store the container in the bathroom where it’s damp.
- Write the date on the new container when you open it. If the bottle contains cotton, remove the cotton and throw it away after opening.

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<th>ANGINA vs. HEART ATTACK</th>
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<tr>
<td><strong>Brought on by:</strong></td>
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<td><strong>Duration and pain:</strong></td>
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<tr>
<td><strong>Symptoms:</strong></td>
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• Get a fresh supply of tablets 6 months after opening and throw away the old.
• Talk with your doctor or other clinician about the possibility of taking your nitroglycerin before starting an activity, if you’re planning an activity that has caused angina in the past.
• Don’t store tablets in the refrigerator.
• Ask your doctor or other clinician if it’s safe for you to take nitroglycerin, if you’re taking Levitra, Viagra, or Cialis for erectile dysfunction.

What should I do if I have symptoms?
1. Stop what you’re doing.
2. Sit down or lie down.
3. Place one of your nitroglycerin tablets under your tongue. Let it dissolve. Do not chew or swallow the pill. The medication is absorbed directly through the lining of your mouth.
4. If your symptoms are not relieved in 3 to 5 minutes by nitroglycerin and rest, call 911 emergency services.*
5. While waiting for the ambulance, you may place one nitroglycerin tablet under your tongue every 5 minutes until your pain goes away or the ambulance arrives.

6. If you decide not to wait for an ambulance, ask someone to drive you to the nearest emergency room. Do not drive yourself.

How can I reduce my risk of heart disease?
With some lifestyle changes, you may be able to ease your angina pain and lower your risk of heart attack and stroke. You may also reduce the risk of peripheral arterial disease (caused by plaque build up in the arteries that blocks the flow of blood).

Stop smoking. This is the most important step to reduce your risk of heart disease, as well as many other health problems. Contact your Kaiser Permanente Health Education Department or visit kp.org/mydoctor for tools and programs to help you quit.

Eat less fat, especially foods high in saturated fat, such as fatty meats, cheeses, fried food, and whole milk. Avoid trans fat and hydrogenated fat, such as the fat in many processed and packaged foods, like crackers and cookies.

Eat more foods high in fiber, especially soluble fiber, such as fruits, vegetables, whole grains, beans, peas, oatmeal, and barley.

Enjoy more fish, baked or broiled, not fried. Good choices include salmon, tuna, trout, mackerel, herring, sardines, and halibut. These are high in heart-healthy omega-3 fatty acids.

Exercise regularly. Start with 10 minutes of daily activity and work up to at least 30 minutes of exercise on most days. Try walking, swimming, bicycling, or dancing. Your clinician may recommend that you gradually add time to your exercise routine until you reach 45 to 60 minutes of exercise on most days.

Control diabetes or high blood pressure, if needed. Work with your clinician.

Consider losing 5 to 10 pounds, if you’re overweight, by changing the way you eat and being more physically active.

Manage stress in your life to help lower your risk of heart attack. Try stress-reducing activities, such as exercise, tai chi, yoga, or meditation. Your local Health Education Department and kp.org/healthyliving offer options to suit your lifestyle.

Additional resources
For more health information, tools, classes, and other resources:
• Search kp.org/mydoctor
• Contact your local Health Education Department

*If you have an emergency medical condition, call 911 or go to the nearest hospital. An emergency medical condition is (1) a medical or psychiatric condition that manifests itself by acute symptoms of sufficient severity (including severe pain) such that you could reasonably expect the absence of immediate medical attention to result in serious jeopardy to your health or body functions or organs; or (2) active labor when there isn’t enough time for safe transfer to a Plan hospital (or designated hospital) before delivery, or if transfer poses a threat to your (or your unborn child’s) health and safety. This information is not intended to diagnose health problems or to take the place of medical advice or care you receive from your physician or other health care professional. If you have persistent health problems, or if you have additional questions, please consult with your doctor. If you have questions or need more information about your medication, please speak to your pharmacist.

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