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اكاديمية فقيه الطبية
Fakeeh Care Academy

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مجموعة فقيه للرعاية الصحية
Fakeeh Care Group



Heart Attack

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Coronary Artery disease is the leading cause of death in America and Europe. Unfortunately, this disease is rapidly increasing in our country, as we find young people in their thirties and forties who have suffered (a heart attack). Smoking, binge eating, laziness, lack of exercise, and exposure to severe psychological pressures create the possibility of coronary heart disease, which nourishes the heart muscle.

What are the factors causing cardiovascular disease [heart disease]?

There is a group of factors that predispose to this disease. We call these factors to risk factors and divide them into the following:

1. Uncontrollable factors such as age, gender, and genetics.
2. Controllable and manageable factors: such as smoking, high blood cholesterol [hypercholesterolemia], high blood pressure [hypertension], diabetes, lack of physical inactivity, and obesity.

And knowing that smoking increases the risk of heart attack and other factors such as high blood pressure, cholesterol and diabetes increase the risk.

What is a heart attack [Myocardial infarction]?

A heart attack occurs when one of the coronary arteries becomes blocked by a clot (thrombus) that obstructs blood flow, and a part of the heart muscle that waters the blocked artery is damaged. If this part is small, it develops into scar tissue, and the patient gradually returns to a normal state. However, if the area of affected interest is large, or the site of injury is large and tender, severe complications and heart clots can occur, which is the hidden killer that leads to many sudden deaths that befall people in the prime of their health and well-being.

How does a heart attack patient feel, where is the injury, and how is the condition diagnosed?

The patient of a heart attack [infarction] complains of pain, usually in the chest, accompanied by pain in the shoulder and left arm, and in some cases, the pain of a heart attack is in the upper part of the abdomen and extends to the lower jaw.

The pain may be accompanied by nausea, shortness of breath, or fainting, and the patient may appear pale and sweaty. The diagnosis of this patient needs to be documented by an electrocardiogram and testing of cardiac enzymes in the blood, with intensive monitoring for at least 24 hours. The patient with a heart attack remains in the hospital for at least seven days.

Does a heart attack patient need medication after discharge from the hospital?

Most patients need more than one medication after discharge from the hospital, including drugs that prevent blood clotting, such as modern anticoagulants.

Studies have demonstrated the effectiveness of anticoagulant drugs in preventing further blood clots in the heart in people who previously had a heart attack or in treating unstable myocardial infarction. However, the patient must follow the physician's instructions regarding dosage, duration of treatment, etc.

What about psychological stress?

The patient is advised to avoid psychological stress as much as possible. Some may suffer from psychological stress, hidden behind multiple patient complaints, such as fatigue and rapid agitation or nervousness, which quickly disappears.

When can a heart attack patient return to work?

Most patients who have had a heart attack can return to light work according to the attending physician's instructions. As for work that requires more effort, they can resume it after about two months, according to the attending physician's instructions, but returning to stressful work is impossible in most cases.

Can a heart attack patient drive again? And when?

The heart attack patient is prohibited from driving a car for the first month after the injury, after which the patient who does not complain of symptoms may drive after consulting with the attending physician. Patients who complain of chest pain while driving should avoid driving, and heart attack patients should not drive public cars that carry passengers or large buses unless after conducting tests to confirm the safety of the coronary arteries.

Can a heart attack patient travel by air?

The heart attack patient should avoid travelling by air for at least the first three or four weeks, and it is advisable to postpone travel for a longer period and should consult before travelling and inform the airline of the patient's situation so that it can facilitate travel procedures and transfer the patient at the airport. In all previous cases, the attending cardiologist advises patients upon assessing the disease condition.

Precautions to follow after a heart attack:

A heart attack patient may be exposed to the possibility of other clots in the heart or in other parts of the body, such as the brain, which can cause a stroke. The heart attack patient is exposed to the possibility of another clot.

Therefore, in view of the increased risk of stroke, the patient should do the following:

- Modify lifestyle and exercise in proportion to their health condition.
- Eat a healthy low-fat diet and maintain an ideal weight.
- Give up smoking permanently because it doubles the infection rate.
- Avoid excessive stress, whether muscular or psychological.
- Regularly take medications and periodically follow up in the heart outpatient clinic.



What is the risk if treatment is stopped without consulting a doctor?

There is a great risk if medications that prevent blood clotting and Plavix are interrupted, and stopping treatment may lead to further clots. Thus, it is necessary to fully comply with the drug treatment to prevent clots in the future and for a certain period determined by the attending physician.

Can a heart attack patient do physical exercise?

Generally, the patient is free to exercise in the patient ward before discharge from the hospital. This physical activity is gradually increased after discharge from the hospital, and once the patient has reached a period of 4 weeks after discharge from the hospital so that they can walk unless accompanied by chest pain or shortness of breath), the patient should put on a pack of Nitroglycerin or Isordil (under the tongue) pills in their pocket if possible. Patience is also required when returning to normal physical activity if accompanied by chest pain or shortness of breath. A heart attack patient is forbidden from returning to violent sports such as squash, weightlifting, and the like. However, appropriate sports, such as swimming and cycling, are desirable, and we stress that any activity must be done gradually and under the supervision of the attending physician.

Can a heart attack patient have sexual intercourse?

This is one of the issues that concern many heart attack patients. It is possible to return to sexual intercourse about 4-6 weeks after the heart attack, provided the patient has recovered naturally and after consulting the attending physician.

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