



Myocardial Infarction and its Homoeopathic Management

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Coronary Heart Disease is the leading cause 25-30% of death in most industrialized countries.

On screening of persons over the age of 30 years by a 12-lead ECG, I Chandigarh (urban population) the prevalence was found to be 65.4 and 47.8 per 1000 males and female respectively.

Myocardial infarction: It deals with problems associated with blockage of the coronary arteries. These vessels normally Supply oxygenated blood to the heart muscles. Blockage of the coronary vessel may occur abruptly secondary to a blood clot or spasm of one of the coronary vessels.

Most often this occurs in a coronary artery that has been, narrowed from the progressive effects of atherosclerosis.

Angina: It means chest pain as a result of the hart's inability to receive adequate blood flow (and oxygen). When the blood flow is completely interrupted myocardial infarction (heart attack) results.

Angina may be further described as 'stable' meaning to chest pain is controlled and typical.

Or 'unstable' meaning that the chest pain 'brand new' or increasing in severity and in frequency

Coronary artery disease: It describes the problem more separately. When the coronary arteries have

become narrowed they are considered 'diseased'. This occurs through a gradual occlusive process in the arteries known as **Atherosclerosis**.

Patient with coronary artery disease are at risk for myocardial infarction.

Risk factors for Coronary Artery Disease:

1. Smoking
2. Obesity
3. Diabetes
4. Hypertension
5. Family History of heart attack (parents or sibling)
6. High blood cholesterol
7. Prior Heart attack
8. Low HDL lipoprotein level
9. Elevated LDL level
10. High blood triglycerides

Clinical Features:

Common symptoms of acute myocardial infarction:

Substernal (mid-chest) discomfort – this is usually a dull pain that may radiate to the arm or 'jaw'.

Associated symptoms:

Shortness of breath, sweating and nausea.

Typically the *pain is provoked by exertion*.

Myocardial infarction occurs more commonly in

males over the age of 26.

An myocardial infarction under the age of 26 in male and under the age of 35 in female is unusual.

Aproxiamately 10% patirents having a myocardial infarction may have few symptoms (silent MI) or not at all.

Mi is more commonly in elderly persons and in those with history of diabetes.

Cardiac symptoms can vary in some patients.

Some patients may experience '*chest tightness*', *upper abdominal pain (that radiate to the back)* and or *sudden sweating with or without shortness of breath*.

Due to myriad of presentation a detailed evaluation is critical.

Detailed Evaluation:

History and physical examination.

Clinical finding may include a *rapid pulse or irregular pulse*.

The patient who is experiencing an MI will more often than not, have clear evidence for a heart attack on their electrocardiogram.

Other tests that are helpful include.

- *Repeated ECG*
- *Chest X-ray*
- *Blood test* includes Complete Blood count, Test of cardiac enzymes, Blood electrolytes and coagulation profile.
- Observation of cardiac rhythm on cardiac monitor.

The patient who is at risk for coronary artery disease but is not currently experiencing chest pain might undergo an evaluation that would include any of the following.

- *Stress test*
- *Thallium heart scan*
- *Cardiac catheterisation*
- *EKG*
- *Echocardiography.*
- *Blood cholesterol*
- *Chest X-ray*
- *Holter monitoring*
- *MUCVA scan*

General management:

Treatment of acute chest pain thought secondary to coronary artery disease warrant hospitalization and control of chest pain medications and supplementary oxygen.

Emergency management:

Thrombolytic agent

Surgical management:

Angioplasty PTCA

Coronary artery bypass

Complications:

- Arrhythmia
- Cardiogenic shock
- Sudden cardiac death
- Extension of MI
- Congestive cardiac Failure
- Side effects of the use of thrombolytic medication (e.g. haemorrhage)

How to lessen the cardiac risk:

1. Stop smoking
2. Observe the diet low in fat and cholesterol.
3. Sodium chloride intake should be < 6 grams/day
4. Regular exercise within tolerance level
5. Keep the body weight within recommended level.
6. Have an annual physician examination that includes ECG, cholesterol test. LDL cholesterol less than 130, HDL > 40, triglycerides < 200.
7. Close control of Diabetes.
8. Vitamin E administration of 200-400 IU can decrease the level of LDL.
9. See a physician immediately if you are experiencing chest pain or any potential cardiac symptoms.

Homoeopathic Management:

Homoeopathy have widest scope in the management of cases of coronary artery disease.

If we go through specifics following medicines are very useful.

ACONITE (3). **Attacks of intense pain extending from the heart down the left arm, with numbness and tingling of fingers and fear and anxiety that he will drop dead in the street.** Nervous and confused in a crowd. Palpitations with anxiety, cardiac oppression, and syncope. Palpitations < when walking, lancinating stitches prevent the patient from assuming the erect position or taking a deep breath. **Panic attacks.**

ARNICA (3). **Strain to the heart muscle, producing uncomplicated hypertrophy, with swelling of hand from any exertion, hands turn red when hanging down. Heart feels as if tightly grasped by the hand the whole chest feels sore and bruised and cannot bear the clothing to touch it. Pulse is full and strong. Tells everyone he is fine and does not want to be approached. Often the first remedy to use, especially if the heart attack has been brought on by exertion.**

CACTUS (3). Sensation of constriction of the heart, **feels as if it were compressed or squeezed by an iron hand.** Heart pains come on slowly, gradually increase then gradually subside. Angina pectoris, with suffocation, cold sweat and ever-present iron band feeling. Blood clots. Pulse feeble, irregular quick, without strength. Melancholic, taciturn, sad, and ill humored. Worse < about noon, lying on the left side, walking, going upstairs. 11 a.m. and 11 p.m. Better > open air.

DIGITALIS (2). Sudden sensation that the heart stood still. Pulse very small, slow, feeble, intermitting every third, fifth and seventh beat.

Feels as if the heart would stop beating if she moved. Blueness, coldness and suffocation.
Despondency, fearful, anxious for the future.
Worse < when sitting erect, after meals, music.

Better > when stomach is empty, in open air.

KALMLIA (2). Sharp, severe pains about heart taking away the breath with shooting down into stomach and abdomen with slow pulse and numb feelings in left arm. **Pains often travel downward in heart attacks.** Rapid and visible beating of the heart, paroxysms of anguish with great breathlessness, pains in limbs, stitching lower part of chest, right sided face ache.

Worse < when bending over and better > by sitting erect.

LACHEISIS (3). **Great loquacity** jumps from one subject to another. Fits of suffocation and fainting, especially when moving, pulse weak, intermittent, stitches in left side of chest. **Can't bear anything tight around the neck or waist.** Horrible, smothering feeling about the heart awaking him from sleep and compelling him to leave the bed, dread of going to sleep on account of marked aggravation. **Pain begins on the left and extends to the right.** The face is purple, mottled puffed. looks swollen and bloated.

Worse < sleep, and on going to sleep, left side, and heat.

LACTRODECTUS MACTANS (3). The bite of this spider simulates a heart attack. Constriction of the chest muscles, with radiation to the back. Gasping breath. **Violent, pericardial pain extending to the axilla down the arm and forearm to fingers with numbness of extremity.** Pulse feeble and rapid. Skin as cold as marble. Fears losing his breath. **Use this remedy if no other is specifically indicated.**

LAUROCERASUS (2). **Sensation as if the heart would turn over**, causing him to gasp for breath, worse when lying down. Spasmodic tickling cough in cardiac patients. Breathlessness worse < from lying down, motion, stooping, eating, drinking, or warmth.

NAJA (2). **Sense of oppression in chest, as if a hot iron had been run into it and a big weight put upon it.** Angina, threatened paralysis of the heart, body cold, pulse slow, weak, irregular and tremulous. Angina pains extending to the nape of neck, left shoulder and arm with anxiety and fear of death Can not lie on left side, but has great > relief of pain and breathlessness when lying on right side.

Worse < from stimulants.

Better > walking or riding in open air.

SPIGELIA (2). **Great breathlessness at every change of position.** Breathlessness, must lie on right side with head high. Sharp, shooting pains from the heart to the back, radiating from the heart down the arm, over the chest, and down the spine. Great weakness of the body after walking, Great oppression or anxiety about the heart. Craving for hot water which > ameliorates. Fear of sharp pointed things such as needle and pins, afraid of injections and acupuncture.

Worse < from touch, motion, noise, turning, washing, concussion.

Better > lying on right side with head high, inspiring.

TARENTULA (2). **Heart suddenly ceases to beat, with fear of death and constant want of air.** Trembling and thumping of the heart as from a fright. Palpitation with praecordial anguish, sensation as if heart twisted and turned around.

Heart attack from seeing others in trouble.

Extreme restlessness.

Worse < motion, contact, noise, seeing others in trouble.

Better > in open air, **music**, bright colors, rubbing affected parts.

Repertorium

HEART, attack, angina pectoris - ACON., apis., arg-n., ARN., ars., aur., CACT., carbo-v., Dig., Glon., iod., Kalm, LACH., LAT-M., Laur., Naja., nux-v., phos., rhus-t., Spig., verat., Tarent.

Mind –

Anguish with great breathlessness -Kalm.

Anxiety he will drop dead in the street- Acon.

Anxious for the future.- dig., spig.

Despondency- dig.

Fear –

Death, during - ACON., ars., cact., DIG., Naja, Phos., tarent.

Losing his breath. - Lat-m.

Sharp pointed things such as needle and pins, afraid of injections and acupuncture - Spig.

Fine, tells everyone he's is - ARN.,

Loquacity, great, jumps from on subject to another - LACH.

Melancholic, taciturn, sad and ill humored - Cact.

Panic - ACON.

Restlessness, extreme - TARENT.

Pain -

Extensions-

Angina pains extending to the nape of neck, left shoulder and arm with anxiety and fear of death - Naja.

Downward, pains often travel, in heart attacks - Kalm.

Left arm, extending from the heart to, with numbness and tingling of fingers - ACON.

Left to right - LACH.

Violent, praecordial pain extending to the axilla down the arm and forearm to fingers with numbness of extremity - LAT-M.

Come on slowly, gradually increase then gradually subside - cact.

Hand -

Squeezed by an iron hand, as if - CACT.

Tightly grasped by the hand, as if -arn.

left sided - LACH.

Sore and bruised, chest feels - ARN.

Stopped, sensation as if - Arg-n., Aur., Cact., DIG., Lach., tarent.

Stop beating, feels as if the heart would, if she moved- DIG.

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