How long will I be in hospital after a heart attack?

If you have had a heart attack, you are likely to spend 2-7 days in hospital, depending on the treatment you require. People who need coronary artery bypass graft (CABG) surgery usually stay in hospital until their surgery date which typically occurs 1-2 weeks after admission.

What happens after a heart attack?

After treatment for a heart attack, your healthcare team will guide you through a recovery and rehabilitation program, which may include:

Medications: To manage symptoms, prevent complications, and improve heart function. Your healthcare team will talk to you about the medication you need.

Lifestyle changes: See section below

Cardiac rehabilitation: A supervised program involving exercise, education, and counselling to help recovery, improve heart health, and reduce the risk of future heart problems.

Management of risk factors: You will have a clinic appointment a few months after your heart attack. Here, your healthcare team will monitor your progress and make sure that any other conditions like high blood pressure, diabetes, and high cholesterol levels are treated as well as possible.

Anxiety and depression: Some people are at increased risk of anxiety or depression following a major event such as a heart attack. If you are having very negative thoughts, this isn't your fault and many people feel the same way. Please talk to your healthcare team if these feelings are affecting you.

Lifestyle following a heart attack

To reduce the risk of future heart problems, it is important to do your best to make long-term changes to your lifestyle including:

- Stopping smoking and avoiding exposure to second-hand smoke.
- Trying to stick to a balanced and heart-healthy diet, rich in fruits, vegetables, whole grains, lean proteins, and low-fat dairy products.
- Trying to do regular physical activity as recommended by your cardiac rehabilitation team.
- Trying to maintain a healthy weight

Making progress on some (or all) of these things will make a big difference to your overall risk of another heart attack in the future. It will also reduce your risk of other serious medical conditions.

Any questions or comments?

If you have other questions that we haven't covered then please ask the healthcare team looking after you. Unfortunately, NW Hearts Charity can't answer questions about your own health situation.

If you have any comments about this leaflet (good or bad), then please contact **office@nwhearts.org**

NW Hearts Charity always welcomes feedback about how we are doing and how we might improve.

V1 Sept 2024

Patient information leaflet developed by **NW Hearts Charity**

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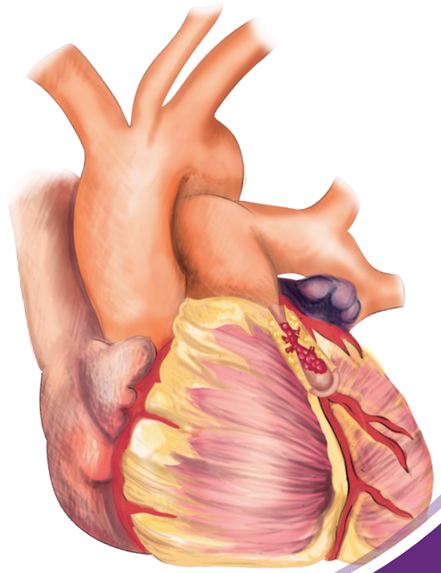


Myocardial Infarction (Heart Attack)

Patient information leaflet

NW Hearts Charity

Your heart · Your charity

What is a heart attack?

Imagine a pipe that gets clogged up with limescale. During our lives, fatty cholesterol deposits can build up in the linings of coronary arteries, the main blood vessels that form the plumbing system of the heart. Coronary arteries are like pipes carrying oxygen in the bloodstream that the heart needs to pump normally. Over time, the fatty cholesterol buildups in their linings may cause them to narrow, which is called coronary artery disease. Eventually, one or more of the buildups may burst, forming a blood clot that blocks one or more arteries. Part of the heart will then be deprived of oxygen, causing a heart attack.

When this happens, the heart muscle starts to get stressed and may send out pain signals. This pain is often felt in the chest, but it can also feel like indigestion or discomfort in the arm, jaw, or back. The heart usually keeps beating during a heart attack, although it may not pump normally.

The medical name for a heart attack is a Myocardial Infarction (sometimes called a 'MI'). Your healthcare team may also use the words STEMI or NSTEMI to talk about different types of heart attacks. This just refers to the two types of pattern that doctors see when they use a test called an electrocardiogram (ECG) during or after a heart attack.
A heart attack is a medical emergency. If you feel you may be having a heart attack, it's important to seek urgent medical attention - call 999 and ask for an ambulance.

What are the causes of coronary artery disease?

Many different risk factors can make it more likely for someone to develop coronary artery disease.
Some risk factors for coronary artery disease – like family history – can't be changed. Your risk also increases as you get older and if you belong to a certain ethnic group. For example, South Asian people are more likely to develop coronary artery disease earlier in their lives than White British people. If you are aware that a parent or

grandparent developed coronary artery disease at a young age, your risk may also be increased. Please talk to your healthcare team if you are worried about this possibility.

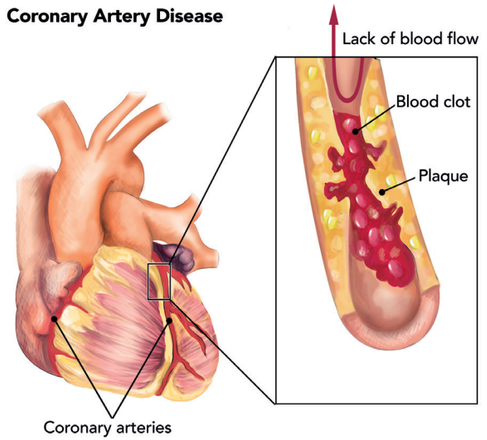
Some risk factors for coronary artery disease can be altered to lower your risk, often with the help of your healthcare team. If you smoke, one of the most important things you can do for your future health is to try your best to quit. If you have diabetes, high blood pressure or high cholesterol, your GP can help you ensure these conditions are as well managed as possible. If you are overweight, trying to lose weight will be of great benefit. Taking regular exercise (within your limits) and eating a balanced, heart-healthy diet can also reduce your risk. The details of a heart-healthy diet are described later in this leaflet in the section *'Lifestyle following a heart attack'.*

How is a heart attack diagnosed?

If you have a suspected heart attack, your healthcare team will ask you questions about your symptoms, take a medical history and examine you. They will also arrange a series of tests, which may include:

- **ECG** (an electrical trace of the heart)
- **Blood tests.** People who have had a recent heart attack usually have an increased blood level of a protein called troponin, which is released by damaged heart muscle. However, there are other causes of an increased troponin level. If your troponin level is raised but the healthcare team thinks a heart attack has not occurred, you may need further tests.
- **Echocardiogram** (a scan of the heart's structure and function using ultrasound).
- **A coronary angiogram.** This test can diagnose a narrowed or blocked heart artery.

Your healthcare team will consider all this information when they diagnose a heart attack. If some pieces of evidence for a heart attack are very clear, they may make a diagnosis before all the information is available.



How is a heart attack treated?

The healthcare team may start treatment as soon as a heart attack is suspected, including giving you blood thinning medication to dissolve blood clots and to prevent new clots forming. This treatment may be given as tablets or an injection. Sometimes, a procedure needs to be performed as an emergency. Other treatments may include:

- **Angioplasty and stenting:** A balloon stretch and/or stent procedure to the artery. This unblocks the arteries using specialised balloons and often also a stent to restore blood flow. A stent is like a tiny scaffold that helps keep your heart's arteries open.
- **Coronary artery bypass grafting (CABG):** An operation that creates new pathways for blood flow, which bypasses blocked or narrowed arteries.
- **Medications:** Sometimes tablets are the only treatment option required for your heart attack.

Your healthcare team will talk to you about the right treatment for you, based on your condition and medical history.

Is a heart attack the same as a cardiac arrest?

No. The terms are sometimes confusing. A cardiac arrest is more like a power cut in your house when all the lights go off. In cardiac arrest, the heart's electrical system malfunctions, causing it to suddenly stop beating altogether. Since the heart isn't pumping blood, oxygen can't reach the brain and other organs. This can be very dangerous if not treated immediately.

In about 1 in 10 people, a heart attack can trigger a cardiac arrest in the early stages. This happens because the lack of blood flow during a heart attack may disrupt normal electrical patterns, making the heart suddenly stop. This is the main reason that people who have had a heart attack are closely monitored in hospital afterwards.

What happens in hospital after a heart attack?

After a heart attack is diagnosed, most patients will be admitted to a specialised ward for careful monitoring where a cardiac monitor will be attached with stickers on your chest which will monitor you for changes in your heart rhythm. You will have regular checks of your blood pressure and oxygen levels. Many patients will also have a chest x-ray, blood tests and an echocardiogram (cardiac ultrasound). Some patients will go to the cardiac catheterisation laboratory for a coronary angiogram procedure and may need a balloon stretch and stent procedure (angioplasty) to open up the blocked artery.