



What to Do When Your Heart Disease Is “Stable”

Coronary artery disease, or **CAD**, is a build-up of fat and cholesterol in the arteries that supply blood to your heart. These deposits, which are called **plaques**, grow slowly over decades and portions of the artery can become clogged and narrowed, limiting the amount of blood able to flow to the heart.

Depending on the symptoms you experience, your heart disease may be characterized as “**acute**,” “**unstable**,” or “**stable**.”

- **Acute** symptoms start suddenly. If your heart disease is “acute,” you may be having a **heart attack**. In this situation, prompt treatment with angioplasty could save your life and stop damage to the heart muscle. That answer is clear, and backed up by decades of research.
- **Unstable** heart disease means that your symptoms have been changing recently. If your symptoms indicate your heart disease is “unstable,” your doctor may be concerned that a heart attack is developing. It is likely that he or she will recommend **angioplasty and stenting** or **bypass surgery** in order to restore blood flow to your heart, possibly preventing a heart attack.

What If Your Condition Is “Stable”?

Then your treatment choices will depend in large part on how troubling your **symptoms** are, whether **medications** are working for you, and your **test results**.

- **Your Symptoms:** Stable heart disease may be characterized by **chest discomfort**, **shortness of breath**, and **fatigue** when you are exerting yourself – such as while you are exercising, climbing a flight of stairs, or roughhousing with your children or grandchildren. Your life is not in immediate danger, but the symptoms may take

much of the pleasure out of your daily life. Stable heart disease means that these symptoms have not changed in duration, frequency, or severity (in other words, they are predictable). However, if these symptoms begin to change or appear when you are not exerting yourself, your heart disease may have progressed from stable to unstable.

- **Medications:** If your symptoms remain stable, your doctor may recommend treating your symptoms with medications. As long as the symptoms are not troubling you too much and they do not appear to be progressing, this treatment strategy may work for you for an indefinite period.
- **Test Results:** To monitor the severity of your heart disease, your healthcare provider may recommend a **stress test** and/or an **angiogram**, both of which provide important information on how your heart is doing. During the angiogram, your doctor may use a special test called **Fractional Flow Reserve (FFR)** to determine how “tight” the blockage in your heart artery is.

What Is Fractional Flow Reserve?

During a cardiac catheterization procedure (or diagnostic angiogram), interventional cardiologists may use **Fractional Flow Reserve (FFR)** to measure how “tight” a blockage is. FFR is determined by a carefully calibrated sensor that measures the blood pressure upstream and downstream of a blockage after the administration of adenosine, a medication that increases blood flow in the heart. Because a tight blockage restricts the blood flow, the pressure downstream would be lower than the pressure upstream. If the FFR finds the ratio between the two measurements is significant, then the blockage is confirmed to be tight. FFR is considered to be complementary to a conventional



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angiogram, particularly when the tightness of a blockage is difficult to establish by angiography or when patients have not have non-invasive stress testing.

According to the most current study published on the treatment of stable coronary artery disease, when an FFR tests indicates that a stable heart disease patient has one or more “tight” blockages, the best treatment options is angioplasty and stenting plus medications. This study found that stable heart disease patients with “tight” blockages who were treated with angioplasty and stenting and the best available medications had better outcomes than patients who received only the medications. The patients who received the angioplasty and stenting were **significantly less likely to require an unplanned hospitalization leading to urgent revascularization** (angioplasty) to stop a heart attack or control symptoms that had become unstable. In addition, they felt better and were **less likely to need medications for chest pain**.

What Is Angioplasty and Stenting?

Angioplasty is a procedure designed to restore normal blood flow through clogged or blocked arteries, which can lead to heart attack, stroke and other serious cardiovascular problems. During angioplasty a thin tube called a **catheter** is threaded through a blood vessel to the site of a blockage. The catheter has a balloon on its tip that is expanded to push the plaque (the fatty substance that is causing the blockage) out of the way. The goal is to reopen the blood vessel to as close to a normal diameter as possible, allowing blood to flow freely.

What Questions Should I Ask My Healthcare Provider About My Stable Heart Disease?

1. Am I in danger of having a first or recurrent **heart attack**?
2. What does my **chest pain (angina)** mean for me? What can we do to manage or eliminate my chest pain?
3. What additional **tests** may I need?
4. What are my **treatment options**? What combination of lifestyle, medication, and in-hospital treatments/surgery may be necessary to combat the disease?
5. What is my **prognosis**? What are the likely **outcomes**?
6. Will I be able to have my desired **quality of life**? What can I do to improve the odds of this?
7. What happens **after treatment**? If treatment involves recovery, how long will that take? Will I need to take **medications** and, if so, for how long?
8. What **follow-up** will be necessary, and **how long** is my treatment likely to be effective?
9. Am I a good candidate for a **cardiac rehabilitation** program?
10. Who can I turn to for **support** (hospital staff, support groups, etc.)?

What Should I Do If I Have More Questions?

Ask them. Any time you have a healthcare decision to make, the conversations you have with your doctor are the key to successful results. Be sure your doctor is aware of all of your symptoms as well as all of the medications, vitamins, and supplements you may be taking. **And ask every question you have.**