Coronary Artery Disease

Take Control, Live Better
Coronary artery disease means that the blood vessels that bring blood to the heart (coronary arteries) have become narrow. They get narrowed by plaque, which is a buildup of fat and other substances.

When you have this heart disease, your arteries can’t bring as much blood and oxygen to your heart muscle. Poor blood flow can cause chest pain or pressure or other symptoms. If the blood flow gets completely blocked, a heart attack happens.
Over time, your heart may get weaker and not pump as well as it should. This can lead to dangerous heartbeat problems and heart failure.

You may not feel sick until this disease gets worse. Some people have it for years without having chest pain or any other symptoms. This may make it hard to feel like you need to pay attention to the problem.

But try not to ignore this heart disease, even if you feel fine right now. The goal is to keep feeling good for a long time. You have a better chance of doing that if you start living healthier today.

What you can do

Many people’s biggest fear is having a heart attack. Taking steps to improve your health can help you avoid a heart attack and live longer and better.

Here are heart-healthy things you can do now:

▸ **Eat vegetables, fruits, and whole grains.** Limit added sugar, saturated fat, and salt (sodium).

▸ **Get some exercise on most days of the week.**

▸ **Stay at a healthy weight.** Lose weight if you need to.

▸ **If you smoke, quit.**

▸ **Take any medicines your doctor prescribes,** such as medicines to manage blood pressure and cholesterol.

Plaque is a buildup of fat and other substances in your arteries.

When to call a doctor

Call 911 if:

You have symptoms of a heart attack. These may include:

▸ Chest pain or pressure, or a strange feeling in your chest.

▸ Sweating.

▸ Shortness of breath.

▸ Nausea or vomiting.

▸ Pain, pressure, or a strange feeling in your back, neck, jaw, or upper belly, or in one or both shoulders or arms.

▸ Lightheadedness or sudden weakness.

▸ A fast or irregular heartbeat.

After you call 911, the operator may tell you to chew 1 adult-strength aspirin or 2 to 4 low-dose aspirin. Wait for an ambulance. Do not drive yourself.

▸ You have angina symptoms that do not go away with rest or are not getting better within 5 minutes after you take a dose of nitroglycerin.

Call your doctor if:

▸ You have angina more often than usual, or it is worse or different than usual.

▸ You have any problems with your medicines.
Symptoms

Many people with coronary artery disease have no symptoms. But others may feel chest pain or pressure or other symptoms when their heart has to work harder. These symptoms are called angina.

Angina is a signal that your heart isn’t getting enough oxygen. The pain or pressure usually is mild at first and gets worse over several minutes. You may feel it in your chest, back, neck, jaw, upper belly, shoulders, or arms.

If you’ve had angina for a while, you can usually predict when your symptoms will happen. You probably know what things cause your angina and how to relieve it. This is called stable angina.

Most people can manage symptoms of stable angina. This includes taking medicine and paying attention to your symptoms so you know what is typical for you. Tell your doctor if you have a change in symptoms. You might need to change your treatment.

Tips for reducing angina

Here are some things you can try.

▸ If an activity causes angina, be active at a level that doesn’t cause symptoms.
▸ Warm up slowly before activity.
▸ Give yourself time to rest and digest right after meals.
▸ Eat smaller meals more often during the day instead of two or three large meals.
▸ Get help with heavy chores such as shoveling snow or mowing the lawn.
▸ If you’re not taking medicine for angina, ask your doctor if medicine could help.

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Your doctor may talk to you about having an angiogram. This test can show how serious the coronary artery disease is and how best to treat it. But there are also reasons why you may not need or want an angiogram. For help deciding, go to https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/冠状动脉疾病的症状

冠状动脉疾病的人可能没有症状。但其他人可能会在心脏工作更努力时感到胸痛或压力或其他症状。这些症状被称为心绞痛。

心绞痛是心脏无法获得足够氧气的信号。疼痛或压力通常一开始很轻微，随着时间的推移会变得更严重。你可能会在胸部、背部、颈部、下巴、上腹部、肩膀或手臂感到它。

如果你的心绞痛持续一段时间，你通常可以预测症状。你可能知道什么会导致你的心绞痛以及如何缓解它。这被称为稳定型心绞痛。

大多数人都可以管理稳定型心绞痛的症状。这包括服药并注意你的症状，以便你知道什么是典型的。告诉你的医生如果你的症状有所改变。你可能需要改变你的治疗。

心绞痛管理提示

这里有一些你可以尝试的事情。

▸ 如果一个活动会导致心绞痛，那么在不引起症状的水平上进行活动。
▸ 缓慢热身后再进行活动。
▸ 给自己时间在饭后休息和消化。
▸ 每天吃小餐而不是两顿或三顿大餐。
▸ 如果你没有服药治疗心绞痛，请问你的医生是否可以使用药物。

访问网页

您的医生可能会与您讨论进行血管造影。这种测试可以显示冠状动脉疾病有多严重以及如何最好地治疗。但是，也有原因让你不需要或不想进行血管造影。欲了解更多详情，请访问 https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/冠状动脉疾病的症状。
What to do when you have angina

▸ Stop what you are doing.
▸ Sit down and rest.
▸ If you use nitroglycerin, take one dose.
▸ If you’re not feeling better within 5 minutes, call 911. Stay on the phone. The emergency operator will tell you what to do next.

If you take nitroglycerin

Nitroglycerin is a medicine that opens blood vessels to improve blood flow. This relieves angina.

Your doctor will tell you when to use your nitroglycerin. You may need to take it:

▸ To relieve sudden angina.
▸ Before stressful activities that can cause angina, such as exercise.

Do not take pills for erection problems (such as Cialis, Levitra, or Viagra) if you’re taking nitroglycerin. Taking any of these medicines with nitroglycerin can be dangerous. If you get angina and have taken one of these medicines, tell your doctor so that you’re not given nitroglycerin or a similar medicine.

Prevent medicine interactions

Always tell your doctor about all the medicines you’re taking, including over-the-counter medicines and supplements. This will help reduce the chance that your doctor will give you a medicine that could interact with another medicine and cause problems.

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To learn more about when and how to use nitroglycerin, go to https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/using-nitroglycerin-for-angina-hw85228spec.
Treatment

Treatment for coronary artery disease focuses on taking steps to manage your symptoms and reduce your risk for heart attack and stroke. A healthy lifestyle, medicines, and procedures are used.

Did you know?

A heart-healthy lifestyle is an important part of your treatment. This includes healthy eating, being active, staying at a healthy weight, and not smoking. This lifestyle can help you have the best chance at living a longer, healthier life.

Medicines

Medicines can help control your symptoms and can lower your risk for heart attack and stroke. Some of the medicines that are prescribed for people with coronary artery disease include:

- Statins to lower cholesterol.
- Blood pressure medicines, such as beta-blockers or ACE inhibitors to lower blood pressure.
- Aspirin or other medicines to reduce the risk of blood clots.
- Nitrates to relieve angina.

If you take medicines, take them on a schedule and take the correct dose. Taking medicines the right way can help prevent a heart attack or stroke.

Angioplasty and bypass surgery

If your angina symptoms get worse even though you’re taking medicines, you may think about having a procedure to improve blood flow to your heart. A procedure may also be done when the coronary arteries are blocked during a heart attack.

Angioplasty is used to open narrowed arteries. It isn’t a major surgery. The doctor guides a thin tube (catheter) into the narrowed artery and inflates a small balloon. This widens the artery to help restore blood flow. Often a small tube that can expand (a stent) is placed to keep the artery open.

Bypass surgery may also be used if arteries are narrowed. It is a major surgery. It uses healthy blood vessels to create detours around the narrowed arteries.
Cardiac rehab

Your doctor may want you to take part in a cardiac rehabilitation (rehab) program after you’ve had angioplasty or bypass surgery. But even if you haven’t had one of these procedures, you can still benefit from the program.

In cardiac rehab, a team of health professionals provides education and support to help you make new, healthy habits.

In cardiac rehab, you’ll learn how to:

▸ Manage heart disease and other problems such as high blood pressure and high cholesterol.
▸ Exercise safely.
▸ Eat a heart-healthy diet.
▸ Quit smoking.
▸ Reduce stress and depression.
▸ Get back to work sooner and safely.

Taking part in a cardiac rehab program can help lower your chance of having a heart attack or stroke. It may also reduce your need for medicine and improve your overall health.

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Ask your doctor about joining a cardiac rehab program. Many people who have heart disease find the program helpful.

To learn more about cardiac rehab, go to https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/cardiac-rehabilitation-hw229962.
Heart-healthy eating

Heart-healthy eating can help you keep heart disease from getting worse.

Heart-healthy eating means that you:

▸ Eat vegetables, fruits, whole grains, and other high-fiber foods.
▸ Limit foods and drinks with added sugar, saturated fat, and salt (sodium).
▸ Eat at least two servings of fish each week. Oily fish, which contains omega-3 fatty acids, are best. These include salmon, mackerel, lake trout, herring, and sardines.
▸ Balance the calories you eat with how much activity you get. This can help you stay at a healthy weight.

Easy ways to add fruits and veggies

▸ Add berries or a banana to cereal or yogurt. Put apple slices in oatmeal.
▸ Add lettuce, tomato, cucumber, and bell peppers to sandwiches. Get pizza with veggies—try mushrooms, peppers, spinach, or broccoli.
▸ Add vegetables to soups, stews, and stir-fries. Puree them first if it makes them easier to use.
▸ Keep carrots, celery, and other veggies handy for snacks.
▸ Have a salad with dinner every night. Make it mostly vegetables, rather than mostly cheese, croutons, and salad dressing.
▸ Have fruit for dessert. If a piece of fruit doesn’t seem like dessert, try baked apples with cinnamon.
Get more whole grains
Choose:
▸ Whole wheat bread instead of white bread.
▸ Whole-grain crackers and cereals.
▸ Oatmeal and other high-fiber cereals.
▸ Brown rice instead of white rice.
▸ Whole wheat pasta.
Try other whole grains like bulgur, barley, and quinoa.

Choose healthy fats
There are healthy fats and unhealthy ones. Many people eat too much of the unhealthy types—saturated fats and trans fats.

Choose foods that have healthy fats, such as:
▸ Oily fish (like salmon and mackerel).
▸ Nuts, seeds, and soybeans.
▸ Vegetable oils (like canola, olive, and flaxseed).
▸ Avocados and olives.

Avoid foods and drinks that have unhealthy fats as much as you can. These include whole milk, whole-milk cheese, whole-milk yogurt, butter, margarine, red meat, and processed foods like store-bought pastries and cookies.

Heart-healthy eating tips

Instead of: Try this:
Frying your food Bake, broil, steam, poach, or grill your food.
Eating convenience foods (canned soups, TV dinners, frozen pizza) Eat fresh fish, skinless chicken, fruits, and vegetables.
Using butter, shortening, or oil high in saturated and trans fats Use products low in saturated and trans fats, such as olive oil, vegetable oil, canola oil, and chicken broth.
Using salt, soy sauce, or BBQ sauce Use salt-free spices.
Eating all of the meat product Trim fat from meat and skin from chicken.

To learn more about heart-healthy eating, go to https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/healthy-eating-tb1869.
Getting active

If you’re not active now, starting to exercise may seem hard. But it’s worth it. And you don’t have to do a lot to make a difference.

Being more active can:

▸ Help you control your weight and blood pressure.
▸ Make your heart stronger and reduce symptoms like chest pain.
▸ Help you avoid a heart attack or stroke.
▸ Reduce stress and give you more energy.

Walking is a great way to get exercise. If your doctor says it’s safe, start out with some short walks, then gradually make your walks a little longer. You might also try swimming, biking, or water aerobics.

The important thing is to get some exercise most, if not all, days of the week. Even a little exercise can help if you haven’t been active at all.

Your doctor can help you make a plan. You can use the form on the next page to record your goals and other details.

Be safe when you exercise

See your doctor before you start exercising. He or she may want to do a test to see how much activity your heart can handle.

If your doctor has prescribed nitroglycerin for you, be sure to have it with you whenever you exercise. Stop what you’re doing right away if you have any chest pain or start to feel bad.

Go to web

Want to be more active? To learn more about how to get started, go to https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/coronary-artery-disease-te7797.
### Exercise planning form

**Special tests I need before I begin an exercise program (if any):**

**Exercises I should not do:**

**Exercises to help with my chronic health conditions:**

**Should I change the time I take my medicines?**

**Warning signs I need to watch for:**

**Should I take my pulse when I exercise?** If so, what range (target heart rate) is best for me?

**In the beginning, my exercise program will be (what, how often, how long):**

**Short-term goals:**

In the next few weeks I will:

1. 
2. 
3. 

**Long-term goals:**

In the next 6 months I will:

1. 
2. 
3. 

As you reach your short-term goals, add new ones.
Quit smoking

Quit smoking is one of the best things you can do for your health. Your risk of dying from a heart attack or stroke will start to go down very soon after you quit.

If you’ve had a procedure to improve blood flow to your coronary arteries, those arteries will be less likely to get narrowed again if you quit smoking.

You’ll also feel better. Your angina may get better. You’ll have more energy and breathe easier. And you may worry less about your health and feel more hopeful about your future.

Smoking and heart disease

Smoking is bad for everyone, but it’s even worse for people with coronary artery disease. Smoking:

▸ Makes your blood more likely to form clots. This can cause a heart attack or stroke.
▸ Can cause a sudden narrowing in your coronary arteries, which can reduce the blood flow to your heart.
▸ Can make your heart beat in an odd rhythm.
▸ Lowers “good” HDL cholesterol and lets “bad” LDL cholesterol build up in your arteries more easily.
▸ Reduces how much oxygen your blood can carry to your heart and the rest of your body.

Did you know?

People who quit smoking cut their risk of heart attack in half within 2 years. In time, their risk of death from a heart attack is the same as if they had never smoked at all.
Thinking about quitting?

It may help to know that you don’t have to quit smoking through willpower alone. There are treatments and resources that can help.

Use treatments

When you try to stop smoking, you may have trouble sleeping, crave nicotine, or feel grumpy, depressed, or restless. These symptoms of withdrawal are at their worst during the first week or so after you quit, but they may last up to a few weeks.

Treatment can reduce withdrawal symptoms and help you quit.

▸ **Try nicotine replacement products.** These include gums, patches, and lozenges. They help your body slowly get used to less nicotine until you don’t need it at all. You can buy these products without a prescription.

▸ **Take medicines** that can help you cope with cravings and mood swings. Your doctor can prescribe these.

Get support

If you’re like many people, smoking is part of your daily routine. You enjoy it. When you quit smoking, you have to give that up (or find something to replace it).

Luckily, you don’t have to do it alone. Lots of people find support from:

▸ The national tobacco quitline: 1-800-QUIT-NOW (1-800-784-8669).

▸ Free smartphone or tablet apps, such as the National Cancer Institute’s QuitPal.

▸ A text-messaging program from www.smokefree.gov called SmokefreeTXT.

▸ Internet programs, such as www.smokefree.gov.

▸ Doctors, nurses, or therapists.

Go to web

Using medicines and nicotine replacement products makes it much more likely that you’ll quit for good.

For help in deciding whether to try them, go to https://www.cigna.com/individuals-families/health-wellness/hw/medical-topics/quit-smoking-zw1124.
Coping and support

Dealing with depression

There’s a link between depression and coronary artery disease. People with heart disease are more likely to get depression. And if they have both depression and heart disease, they may not stay as healthy as possible. They’re less likely to take their medicines and get regular exercise. This may raise their risk for a heart attack.

Depression causes you to feel sad and hopeless much of the time. It’s different from normal feelings of sadness, grief, or low energy. Depression is a medical problem that can be treated.

Your doctor can help

Your doctor may ask you some questions to check for symptoms of depression. But if you think you have depression, don’t wait. Ask for help. Your doctor can help find out if you’re depressed and suggest treatment options. The sooner you get treatment, the sooner you can start feeling better.

Support can help

Whether you’re recovering from a heart attack or trying to avoid one, emotional support is important. Think about joining a heart disease support group. Meeting other people who have the same problems can help you know you’re not alone.
John's story

John didn't think much about his weight gain over the years—at least, not at first. “That number on the scale kept creeping up,” John says. “But I was in denial.”

John’s doctor explained that his weight was putting him in danger of heart problems. “That reminded me of what my dad went through.”

In the 1990s, John watched his dad recover from a heart attack. John’s grandparents and others in his family also had heart disease.

Now his dad rides his bike every day. John started riding his bike too. “I followed my father’s good example,” he says.

He just didn’t follow it regularly.

John realized he had to do more. He was stressed at work. He didn’t get enough sleep because his work schedule changed often. His doctor told him that regular exercise would help with stress, sleep, and weight gain.

“It finally sank in,” John says.

He joined a cycling club. Having others to ride with was motivating. He also joined a weight-loss group. By watching how he eats and getting daily exercise, he’s lost 25 pounds.

“Even my wife says I look good now,” he jokes.

No matter what the activity, doing it with a group makes it easier and more fun, John believes.

He’s so keen on the benefits of fitness, he encourages his coworkers and friends. “My mantra is ‘Find a way to be active.’ It’s made all the difference in my life.”

John’s story reflects his experiences as told in an interview. The photograph is not of John, to protect his privacy.
When you have coronary artery disease, it’s important to plan ahead for what to do if your symptoms get worse. Work with your doctor to make a plan.

### Symptom action plan

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What do I do if my symptoms get worse?

What do I need to check or keep track of? (such as blood pressure or weight)

Do I need to change my diet or activities? If so, what changes do I need to make?