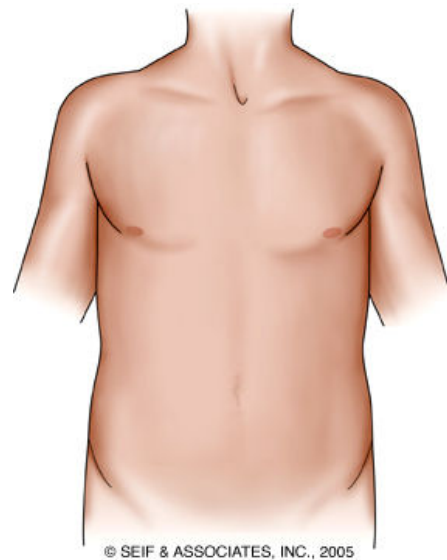


Chest Pain (Non-Specific)

Based on the results of tests and evaluation, your caregiver does not believe that the chest pain is related to your heart. You do not seem to be having a heart attack. Chest pain can have many different causes.

CAUSES

- **Heart burn** is caused by stomach acid going back up into the esophagus. The esophagus is the tube between the mouth and the stomach. The acid burns the sensitive inner layer of the esophagus. This causes pain which is felt in the chest under the breast bone. Heart burn is also called GERD (*gastroesophageal reflux disease*).
- Pneumonia or bronchitis can cause painful irritation of the lung tissues.
- Anxiety and stress may cause tightness in the chest associated with pain.
- Inflammation around your heart (*pericarditis*) or lung (*pleuritis*, or *pleurisy*) may cause chest pain.
- A blood clot can develop in the lung and cause chest pain.
- A collapsed lung (*pneumothorax*) can cause chest pain. It can develop suddenly on its own (a *spontaneous pneumothorax*) or from trauma to the chest.
- The chest wall is composed of bones, muscles and cartilage. Any of these can be the source of the pain:
 - The bones can be bruised by injury.
 - The muscles or cartilage can be strained by coughing or overwork.
 - The cartilage can also be affected by inflammation and become sore (*costochondritis*).



TREATMENT

Treatment depends on what may be causing your chest pain. Treatment may include:

- Acid blockers for heart burn.
- Anti-inflammatory medicine.
- Pain medicine for inflammatory conditions.
- Antibiotics if an infection is present.

You may be advised to change lifestyle habits that may add to your chest pain. These include stopping smoking, caffeine and chocolate. You may be also advised to keep your head elevated when sleeping. This reduces the chance of acid going backward from your stomach to your esophagus.

HOME CARE INSTRUCTIONS

- If antibiotics were prescribed, take the full amount even if you are feeling better.
- Continue physical activities as directed.
- Only take over-the-counter or prescription medicine for pain, discomfort or fever as directed by your caregiver.
- Follow your caregiver's suggestions for further testing if problems persist.
- If your caregiver has given you a follow-up appointment, it is very important to keep that appointment. Not keeping the appointment could result in a chronic or permanent injury, pain, and disability. If there is any problem keeping the appointment, you must call back to this facility for assistance.

SEEK MEDICAL CARE IF:

- You are having problems that you think may be side effects of the medicine you are taking. Read your medication instructions carefully.
- Your chest pain persists even after following advised treatments.
- You develop a rash on your chest with blisters.

SEEK IMMEDIATE MEDICAL CARE IF:

- You have severe chest pain, especially if the pain is crushing or pressure-like and spreads to the arms, back,

neck, or jaw, or if you have sweating, feel sick to your stomach (*nausea*), or shortness of breath. **THIS IS AN EMERGENCY. Do not** wait to see if the pain will go away. Get medical help at once. Call misc329 (911 in U.S.) **DO NOT** drive yourself to the hospital.

- Your chest pain gets worse and does not go away with rest.
- You have an attack of chest pain lasting longer than usual, even with rest and treatment with the medications your caregiver has prescribed.
- You wake from sleep with chest pain or shortness of breath.
- You feel dizzy or faint.
- You have chest pain that feels different from your usual pain.

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