Editorial Note on Acute Coronary Syndrome

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Editorial

Did you heard about acute coronary syndrome and heart attack, or unstable angina? These conditions are acute coronary syndromes, an umbrella term for situations where the blood supplied to the heart muscle is suddenly blocked. In acute coronary syndrome, the blockage can be sudden and complete, or it can come and go — clot, break open, then clot again. In both cases, the heart tissue is getting weak, even if it’s just a less number of cells or entire heart. Any condition brought on by a sudden reduction or blockage of blood flow to the heart. Acute coronary syndrome is most often caused by plaque rupture or clot formation in the heart’s arteries. Symptoms may include heart attack-like chest pressure, chest pressure while resting or doing light activity or sudden heart stoppage. This condition is treatable if diagnosed quickly. Treatment may include medication, such as blood thinners, clot busters or beta blockers. Surgery may be required.

Acute coronary syndrome is a term used to describe a range of conditions associated with sudden, reduced blood flow to the heart. One such condition is a heart attack (myocardial infarction) — when cell death results in damaged or destroyed heart tissue.

Non-ST-elevation myocardial infarction (NSTEMI), ST-elevation MI (STEMI), and unstable angina are the three traditional types of ACS. The term acute coronary syndrome (ACS) refers to any group of clinical symptoms compatible with acute myocardial ischemia and includes unstable angina (UA), non-ST-segment elevation myocardial infarction (NSTEMI), and ST-segment elevation myocardial infarction (STEMI). Acute coronary syndrome (ACS) is caused primarily by atherosclerosis. Most cases of ACS occur from disruption of a previously non-severe lesion (an atherosclerotic lesion that was previously hemodynamically insignificant yet vulnerable to rupture). Cardiac compromise refers to any kind of heart problem. Patients may complain of chest pain, flu-like symptoms, or dyspnea (difficulty breathing). The most common complaint is chest pain.

Emergency signs

- Chest discomfort. Pressure, squeezing, fullness or pain, burning or heaviness.
- Sweating.
- Nausea.
- Shortness of breath.
- Light-headedness.

They include the following: Pressure, fullness, squeezing pain in the center of the chest, spreading to the neck, shoulder or jaw. Light-headedness, fainting, sweating, nausea, or shortness of breath with or without chest discomfort. Upper abdominal pressure or discomfort.

Chest pain caused by acute coronary syndromes can be sudden, as is the case with a cardiac arrest. Meanwhile, the pain can be uncertain or get poorer even with rest; both hallmark symptoms of unstable angina. People who come across chronic chest pain resulting from years of cholesterol accumulation in their arteries can develop an acute coronary syndrome if a blood clot forms on top of the plaque build-up.

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