

When Love Hurts

BROKEN HEART SYNDROME, IF NOT TREATED IN A TIMELY MANNER, CAN LEAD TO A CARDIAC ARREST.

S IT A HEART BREAK or truly a broken heart? Could your grief be so intense that it causes damage to your heart? Science tells us yes. Turns out, broken heart syndrome is real.

As Valentine's Day approaches, pink hearts, chocolates, and Champagne come to mind. Let's not forget about the painful side of love and watch out for those in our lives who are extremely vulnerable at this time of the year. Andrea* age 54, was rushed to the ER on Christmas Eve with chest pain, shortness of breath, and rapid heart rate. Her family thought she was having a heart attack, but further work-up proved that was not the case. Two days later, she was discharged with a diagnosis of "broken heart syndrome".

Andrea's husband had passed away unexpectedly one week earlier, and this was her first Christmas in over 30 years without him. Officially named *Takotsubo cardiomyopathy*, this condition is often triggered by significant emotional stress such as death of a loved one, divorce, sudden loss of money, grim medical diagnosis, or even an emotionally charged argument.

If you have Takotsubo cardiomyopathy,

emotional stress has truly broken your heart. This condition was first discovered in the 1990s in Japan and so named due to the changes in heart shape resembling octopus traps (takotsubos) used in the region. The exact cause of this condition remains unknown.

Classic presenting features of broken heart syndrome include chest pain and shortness of breath which leads many to believe they are having a heart attack, though that is not the case. This condition changes the size and shape of the left ventricle, the portion of the heart responsible for



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Dr. Nguyen's passion for human service is highlighted by his compassion for patient care, belief in Women's Health, commitment to clinical research in the areas of "Health Status Outcomes", and relentless support of medical and clinical education. In 2008, Dr. Nguyen founded Elite Cardiology, LLC, where he currently practices cardiovascular medicine. He is on staff at St. Joseph's Hospital (Elgin), Sherman Hospital (Elgin) and Northwestern Medicine Kishwaukee Hospital (DeKalb) where he brings technology, innovation, and research to optimize patient care. In 2012, Dr. Nguyen founded Sudden Cardiac-death Awareness Research Foundation (S.C.A.R.F.), a nonprofit organization in response to an overwhelming need for public education and awareness of sudden cardiac arrest/death.

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pumping oxygen-rich blood to the body. When the left ventricle of the heart becomes dilated, its ability to pump effectively is weakened, leading to heart failure.

WHO THIS CONDITION AFFECTS

While this condition primarily affects females greater than 50 years of age, men and younger people are not fully excluded. There is an increased risk of Takotsubo cardiomyopathy in those with a previous or current mental illness such as depression or anxiety or a history of tobacco use. Even though broken heart syndrome is a transient condition with most patients recovering within a month, it can take longer and sometimes lead to other complications such as pulmonary edema (a back-up of fluid in the lungs), hypotension (low blood pressure), abnormal heart rhythms, and even heart failure. In addition, a person has a chance of experiencing Takotsubo cardiomyopathy again should more stressors occur. Most physicians treat Takotsubo cardiomyopathy with a hospitalization and medications traditionally used to treat heart failure.

Maria* was 63 years of age and seemingly was living a perfect life until one evening she got into an intense argument with her husband. The fight ended with him walking out the door and stating that he wanted a divorce. Three days later, Marie called 9-1-1 and was brought to the ER with complaints of severe chest pain, worsening shortness of breath, and extreme fatigue.

Her cardiac work-up did not identify signs of a heart attack, but an echocardiogram demonstrated reduced functioning of her left ventricle. She was stabilized and discharged home on some new medications. Fourteen months later, her divorce was finalized, and her cardiac function had returned to normal. When asked about her experience with this condition, she describes it as "emotional distress so severe that I could actually feel my body breaking down with intense pain in my heart."

The effects of long-term stress have been well known for quite some time. We are now learning that both chronic and acute emotional stress can cause psychological (mental) and physiological (physical) changes in the body such as a truly broken heart. Simply going to the doctor and having normal test results is not enough. Doctors and patients need to take time to have conversations to prioritize mental wellness with a specific focus on stress management.

*To learn more, visit elitecardiologysolutions. com or call 815-758-7700. *The names in the article have been changed to protect patient privacy.* ()