

MEDICAL ALERT CARD



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MICROVASCULAR DYSFUNCTION AND MICROVASCULAR ANGINA

Microvascular Angina occurs when there is a reduction in blood flow to the smaller vessels of the heart and this is often not able to be seen on routine testing.

Microvascular Angina can occur due to spasming in the microvessels or due to the microvessels being unable to dilate. It can also occur because the microvessels are already at maximum capacity when at rest, so they are unable to dilate further on demand.

For more information on Microvascular Angina, please scan the QR codes below and follow www.INOCAInternational.com.



www.INOCAinternational.com

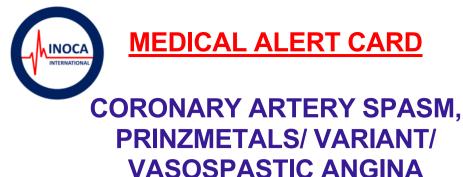
@INOCAInternati1

MICROVASCULAR DYSFUNCTION AND MICROVASCULAR ANGINA

Name
Medical number
Person to contact
Contact number
Medical history
Prescribed Anticoagulants Y/N
Allergies
Drugs to avoid e.g. beta blockers
Pacemaker /ICD. rate CRPT
Consultant cardiologist
Athospital

To control pain please consider IV GTN and analgesia

N.B. Nothing in these summary sheets should be considered in any way as advice or recommendation. All information contained in these sheets is an opinion only and is shared here only in the hope that is it of interest to other patients and medical professionals. Always consult your own medical practitioner before trying any new medications or therapies and before changing any of your current routines



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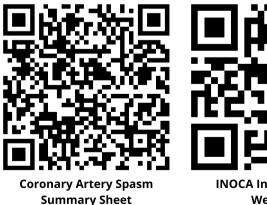
CORONARY ARTERY SPASM, PRINZMETALS/ VARIANT/ VASOSPASTIC ANGINA

Coronary Artery Spasm occurs when the large coronary arteries go into spasm, resulting in a reduction in blood flow to the heart.

Diagnosis via routine testing can often be difficult as the ischaemia from CAS is often only visible at the time the spasms occur, with symptoms often resolving spontaneously as spasms release. If CAS is severe or continues for a long time, this can lead to a heart attack.

Chest pain in people who suffer from CAS tends to occur at rest, for no apparent reason and mainly at night or in the early morning hours. In general, the exercise capacity in CAS patients is not affected.

For more information on Coronary Artery Spasm, please scan the QR codes below and follow www.INOCAInternational.com









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MICROVASCULAR DYSFUNCTION AND MICROVASCULAR ANGINA

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VASOSPASTIC ANGINA

Name
Medical number
Person to contact
Contact number
Medical history
Prescribed Anticoagulants Y/N
Allergies
Drugs to avoid <u>e.g.</u> beta blockers
Pacemaker /ICD, rate CRPT

Consultant cardiologist	Athospital
Consultant c	At

To control pain please consider IV GTN and analgesia

N.B.



CORONARY ARTERY SPASM, **PRINZMETALS/ VARIANT/**

MEDICAL ALERT CARD

Coronary Artery Spasm occurs when the large coronary arteries go into spasm, resulting in a reduction in blood flow to the heart.

VASOSPASTIC ANGINA

Diagnosis via routine testing can often be difficult as the ischaemia from CAS is often only visible at the time the spasms occur, with symptoms often resolving spontaneously as spasms release. If CAS is severe or continues for a long time, this can lead to a heart attack. Chest pain in people who suffer from CAS tends to occur at rest, for no apparent reason and mainly at night or in the early morning hours. In general, the exercise capacity in CAS patients is not affected.

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