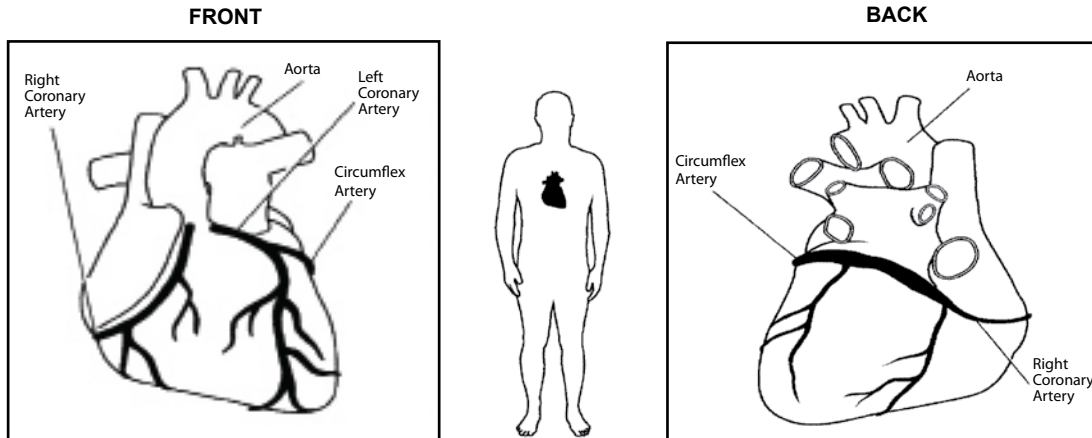


Coronary Artery Disease (CAD)

Coronary artery disease is also called heart disease or atherosclerosis. It is caused by the build up of fatty deposits called plaque in the blood vessels of the heart.

The heart must get oxygen and nutrients to work well. Blood carries the oxygen and nutrients to the heart through the blood vessels called arteries. As the plaque builds up in the blood vessels, blood flow to the heart muscle is decreased. When blood flow is decreased, chest pain, shortness of breath, or other signs may occur. If the blood flow is stopped or blocked, it causes a heart attack.



Signs of Coronary Artery Disease

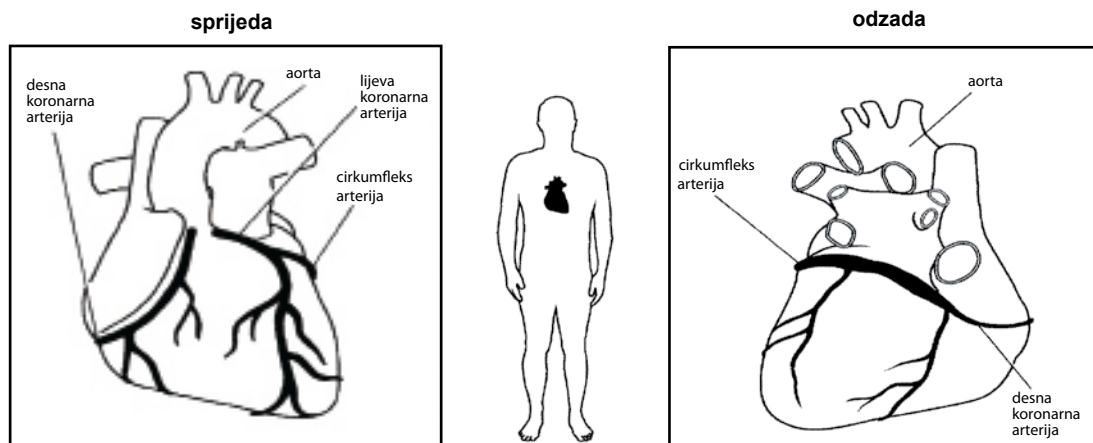
You may not have any signs or you may have:

- Pain or pressure in your chest, arm, jaw, shoulders or neck also called angina. It may spread from one place to another.
- Feeling of tightness, heaviness, squeezing or burning
- Sweating

Bolest koronarnih (srčanih) arterija

Bolest koronarnih arterija se naziva i oboljenje srca ili ateroskleroza. Nastaje usljed taloženja masnih naslaga u krvnim sudovima srca, koje se zovu plak.

Da bi dobro funkcionisalo, srce mora dobijati kisik i hranjive tvari. Krv prenosi kisik i hranjive tvari do srca putem krvnih žila zvanih arterije. Kako se u krvnim sudovima taloži plak, smanjuje se dotok krvi u srčani mišić. Smanjenje krvotoka može uzrokovati bol u prsima, ponestajanje daha ili pojavu drugih simptoma. Zaustavljanje ili zakrećenje krvotoka dovodi do srčanog udara.



Simptomi bolesti koronarnih arterija

Može se desiti da nemate nikakve simptome, ili imate:

- bol ili pritisak u prsima, ruci, vilici, ramenima ili vratu, što se takođe zove angina. Može se širiti s jednog mjesta na drugo.
- osjećaj pritiska, težine, stezanja ili pečenja
- znojenje

- Shortness of breath
- Nausea or vomiting
- Abdominal pain
- Feeling very tired, dizzy or faint

Call 911 if you have any of these signs.

Risk Factors

You are at higher risk for getting coronary artery disease if you:

- Have a family history of the disease
- Have high cholesterol, diabetes or high blood pressure
- Smoke or use tobacco
- Are inactive
- Have stress
- Are overweight

Changing even one risk factor can improve your heart health. You can prevent the disease from getting worse and may even help to improve it.

Your Care

If your doctor thinks that you have coronary artery disease, you may have tests such as:

- An **electrocardiogram (ECG or EKG)** to check the electrical activity of your heart.
- A **cardiac magnetic resonance imaging test (MRI)** to take pictures of how well your heart is working.
- A **stress test** to look for problems with your heart's rate, rhythm or electrical activity. Blood pressure and signs such as shortness of breath or angina are also checked.

- ponestajanje daha
- mučnina ili povraćanje
- bol u stomaku (abdomenu)
- osjećaj velikog umora, vrtoglavice ili nesvjestice

Nazovite 911 ako imate bilo koji od ovih simptoma.

Faktori Rizika

Imaćete veće mogućnosti da dobijete bolest koronarnih arterija ako:

- imate porodičnu istoriju bolesti
- imate visok holesterol, dijabetes ili visok krvni pritisak
- pušite ili koristite duhan
- niste aktivni
- ako ste pod stresom
- imate prekomjernu težinu

Promjenom čak i samo jednog faktora rizika možete poboljšati zdravlje svoga srca. Možete spriječiti napredovanje bolesti, pa čak i poboljšati zdravlje.

Njega

Ako Vaš ljekar smatra da imate bolest koronarnih arterija, mogu Vam se uraditi slijedeće pretrage:

- **elektrokardiogram (ECG ili EKG)** radi provjere reakcije vašeg srca na električni podražaj;
- **test srčanih oboljenja magnetskom rezonancijom (MRI)** radi snimanja funkcije srca;
- **test podnošenja opterećenja ili “stress test”** koji služi za ispitivanje otkucaja srca, srčanog ritma ili električne aktivnosti. Takođe se vrši ispitivanje krvnog pritiska i simptoma poput ponestajanja daha;

- An **echocardiogram** to see the size and shape of your heart and how well it is working.
- A **chest x-ray** to check your heart, blood vessels and lungs.
- **Blood tests** to check levels of fats, cholesterol, sugar and proteins in your blood.

If tests show that you are likely to have CAD, other tests or procedures may be done to treat the disease. The goal is to improve blood flow to your heart muscle and decrease your risk of heart attack. Treatment may include:

- Medicines
- Exercise
- A low fat diet
- Procedures or surgery
- A cardiac rehab program

No matter what type of treatment is done, it does not “cure” the disease. You need to change your risk factors and follow your care plan.

Talk to your doctor about your care or any questions you may have.

- **ekokardiogram** radi ispitivanja veličine i oblika srca, te njegove funkcije;
- **rentgenski snimak pluća** radi ispitivanja srca, krvnih sudova i pluća;
- **nalazi krvi** radi ispitivanja nivoa masnoća, holesterola, šećera i proteina u krvi.

Ako ispitivanja pokažu da je vjerovatno da imate bolest koronarnih arterija, u svrhu liječenja bolesti se mogu primjeniti i druga ispitivanja ili postupci. Vaš cilj je da Vam se poboljša dotok krvi do srčanog mišića i na taj način smanji rizik od srčanog udara. Liječenje može uključiti:

- lijekove
- fizičke vježbe
- dijetu namirnicama s niskim sadržajem masnoća
- liječenje ili hirurške operacije
- kardiološki rehabilitacioni program

Bez obzira na vrstu Vašeg liječenja, ona ne „liječi“ bolest. Morate otkloniti svoje faktore rizika i slijediti svoj plan njege.

Ukoliko imate pitanja ili briga, o tome se posavjetujte sa svojim ljekarom.

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Coronary Artery Disease. Bosnian.