Pericarditis - Inflammation of the Heart Sac

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Introduction

Pericarditis is an inflammation of the sac that surrounds the heart. When a cause can be found an infection, systemic disease, or autoimmune disorder most commonly causes it. Pericarditis can cause sharp stabbing chest pain and difficulty breathing. You should contact your doctor immediately if you suspect that you have pericarditis. It may be treated with medications or minor surgery. If left untreated, pericarditis can be life threatening.

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Anatomy

The pericardium is a thin sac-like membrane that covers the outside of the heart and the roots of the blood vessels that are attached to the heart. The pericardium has an inner and outer layer. The layers have a small amount of lubricating fluid between them. The lubricant allows the layers to move easily when the heart contracts.

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Causes

Pericarditis is an inflammation of the pericardium. In most cases, the exact cause of pericarditis is unknown. However, a viral, bacteria, or fungal infection may cause it. It can result from a heart attack, cancer that has spread, radiation treatment, injury, or surgery. It is associated with some medical conditions, including rheumatoid arthritis, lupus, kidney failure, tuberculosis, cancer, leukemia, HIV, AIDS, and hypothyroidism. In children, adenovirus or Coxsackie virus most frequently causes pericarditis.

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Symptoms

Chest pain is a common symptom of pericarditis. The pain may spread to your neck and shoulder, back, or abdomen. The pain may be sharp and stabbing. Deep breathing, coughing, lying flat, and swallowing may cause your pain to increase. Sitting up or leaning forward may reduce the pain.

It may be difficult to breathe when you lay down. You may need to bend over or hold your chest while you breathe. You may not feel well in general and have a fever, dry cough, and anxiety. You may feel tired all of the time. Additionally, your ankle, feet, and legs may swell.

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Diagnosis

You should contact your doctor immediately if you suspect that you have pericarditis. A doctor can begin to diagnose pericarditis after reviewing your medical history and conducting a physical examination and some tests. You should tell your doctor about your risk factors and symptoms. Your doctor will listen to your heart and lungs. Your blood will be tested for signs of infection or inflammation markers that may indicate pericarditis. In some cases, tests may be conducted to rule out a heart attack or the fluid from around the heart may be collected and cultured.

Imaging tests may be used to see if you have fluid buildup in the pericardium, signs of inflammation, scarring, or an enlarged heart. A chest X-ray, magnetic resonance imaging (MRI) scans, or computed tomography (CT) scans are common imaging tests. An echocardiogram uses sound waves to produce an image of the heart on a monitor. An electrocardiogram (ECG) can record the heart's electrical activity which can be altered by pericarditis. Radionuclide scanning involves using a harmless radioactive dye that is detected by special scanners to create an image of the heart.

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Treatment

The treatment that you receive depends on the cause of your pericarditis. Medications may be used to relieve pain, reduce fluid buildup and treat infections. In some cases, the fluid may need to be drained from the sac with a minor surgical procedure. The outcome for pericarditis is good if it is treated promptly.

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Prevention

You should contact your doctor immediately if you suspect that you have pericarditis. Untreated pericarditis can lead to life-threatening medical complications.

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Am I at Risk

Pericarditis most frequently affects men that are between the ages of 20 and 50 years old following a respiratory infection. People with influenza, systemic diseases, or autoimmune conditions have a risk of developing pericarditis. In some cases, pericarditis may occur as a result of a heart attack.

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Complications

Chronic or untreated pericarditis can cause life-threatening medical problems. It can lead to irregular heart beats and heart failure.

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