

A new paradigm for acute coronary syndrome high sensitive

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Which of the following medications would be the most acceptable alternative to morphine for analgesia in patients with an acute coronary syndrome?

Nitroglycerin is preferable to morphine, which should be used judiciously (eg, if a patient has a contraindication to nitroglycerin or is in pain despite nitroglycerin therapy). is initially given sublingually, followed by continuous IV drip if needed.

What is non ST-elevation acute coronary syndrome? Introduction. Non ST-elevation acute coronary syndrome (NSTEMI-ACS, here defined as unstable angina and non ST-elevation MI) is characterised by episodes of chest pain at rest or with minimal exertion, which increase in frequency or severity, often with dynamic ECG changes.

Which findings on a 12 lead ECG would be expected in a patient with high risk non-ST segment elevation (acute coronary syndromes (NSTEMI ACS)? Findings suggestive of NSTEMI include transient ST elevation, ST depression, or new T wave inversions. ECG should be repeated at predetermined intervals or if symptoms return.

How does atherosclerosis cause ACS? The underlying pathophysiology in ACS is decreased blood flow to part of heart musculature which is usually secondary to plaque rupture and formation of thrombus. Sometimes ACS can be secondary to vasospasm with or without underlying atherosclerosis.

What drugs are used to treat acute coronary syndromes? Anti-platelet drugs help prevent blood clots from forming. They include aspirin, clopidogrel (Plavix) and prasugrel (Effient). Beta blockers help relax the heart muscle and slow the heart rate.

They decrease the demand on your heart and lower blood pressure.

Which medications should be administered as part of the acute coronary event action plan? Anticoagulants or blood thinners, like aspirin or heparin, to dissolve clots or prevent them from forming. Angiotensin-converting enzyme (ACE) inhibitors to lower blood pressure. Beta-blockers to regulate blood pressure and slow heart rate. Nitroglycerin to improve blood flow and relieve chest pain.

What are the 3 types of acute coronary syndrome? The term acute coronary syndrome (ACS) is applied to patients in whom there is a suspicion or confirmation of acute myocardial ischemia or infarction. Non-ST-elevation myocardial infarction (NSTEMI), ST-elevation MI (STEMI), and unstable angina are the three traditional types of ACS.

Can you live a long life after an NSTEMI? The five-year survival rate for NSTEMI patients was 51%, 42% among women and 57% among men.

What is the most appropriate treatment strategy for the unstable NSTEMI ACS patient? It is recommended that most patients with NSTEMI-ACS receive dual antiplatelet therapy with aspirin and a P2Y₁₂ inhibitor, such as clopidogrel, regardless of whether they are undergoing an early invasive or ischemia-guided approach. Parenteral anticoagulation therapy is also recommended regardless of treatment strategy.

What is the prognosis for acute coronary syndrome? Six-month mortality rates in the Global Registry of Acute Coronary Events (GRACE) were 13% for patients with NSTEMI ACS and 8% for those with unstable angina.

What is the umbrella term for acute coronary syndrome? Acute coronary syndrome (ACS) is the umbrella term for the clinical signs and symptoms of myocardial ischemia: unstable angina, non-ST-segment elevation myocardial infarction, and ST-segment elevation myocardial infarction.

Why would a doctor order a 12-lead ECG? This can help your physician to determine if you have had a “heart attack”, or a new arrhythmia. The 12-lead ECG provides more information on the diagnosis of your cardiac arrhythmia than an outpatient Holter or Event monitor, as it represents information recorded from a

larger surface area surrounding the heart.

What is the difference between coronary artery disease and acute coronary syndrome? Coronary artery disease (CAD) and acute coronary syndrome (ACS) are related terms that describe reduced blood flow to the heart muscle, a condition that sets the stage for a heart attack. ACS is an umbrella term that refers to the types of CAD caused by the buildup of plaque in the coronary arteries.

What is the life expectancy of someone with unstable angina? Unstable angina is associated with in-hospital or 6-week mortality of 1.5% to 2.5% (1), and 1-year mortality of up to 10% (2). Recurrent hospital admission is necessary in one-third of the patients.

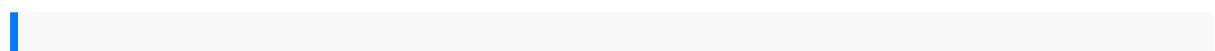
What are the complications of acute coronary syndrome? Possible Complications In some cases, ACS can lead to other health problems including: Abnormal heart rhythms. Death. Heart attack. Heart failure, which happens when the heart cannot pump enough blood.

What drug can be used instead of morphine? Oxycodone. This opioid is a man made (synthetic) form of morphine. It's helpful particularly if morphine hasn't helped or has given you unpleasant side effects. Oxycodone is still a strong opioid and works in a similar way to morphine.

What is an alternative compound that can be used instead of morphine? Both fentanyl and methadone have some potential advantages over morphine since they are longer-acting and have no active metabolites.

What painkiller is equivalent to morphine?

What are alternatives to morphine for chest pain? Fentanyl appears to be a safe and effective alternative to morphine for the management of chest pain in the prehospital setting.



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