

Pericarditis

Pericarditis occurs when the sac around the heart, called the **pericardium**, becomes inflamed (damaged from infection or irritation). Fluid from the inflammation can increase pressure on the heart, squeezing it and making it harder to pump blood to the body.

The March 5, 2003, issue of *JAMA* includes an article about pericarditis.

CAUSES OF PERICARDITIS

- Infections
- Damage from chest injuries or surgery
- Radiation treatment to the chest area
- Uremia (waste products building up in the blood due to kidney disease)
- Rheumatoid arthritis or lupus (a disorder involving inflammation of the skin and other tissues)
- Cancer
- Heart attacks

Sometimes no specific cause can be determined.

SYMPTOMS

- Sharp, piercing chest pain, especially behind the breast bone, spreading to the neck, the left shoulder, and the muscle ridges between the neck and shoulders
- Pain intensifies when the person takes a deep breath
- Pain tends to decrease when sitting up
- Pain with swallowing
- Fever

DIAGNOSIS

Careful history taking of the symptoms and a physical examination by a doctor are very important. An electrocardiogram and another heart test called an echocardiogram often provide useful information.

TREATMENT

Medications such as ibuprofen and colchicine are often effective for treating the pain and inflammation of pericarditis. If pericarditis is found to be caused by a bacterial infection, antibiotics are given. If the excess fluid in the pericardium seriously affects the heart's ability to pump blood, a needle or **catheter** (tube) may be inserted to remove the fluid in a procedure called **pericardiocentesis**. In some cases, surgery is needed to relieve the pressure.

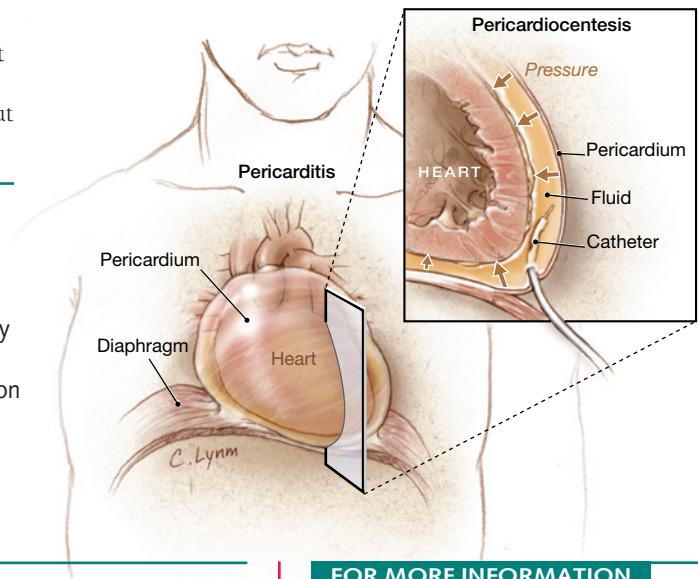
Depending on the underlying cause, pericarditis usually subsides in one month or less. However, if pericarditis is caused by a disease like lupus or rheumatoid arthritis, it can persist for longer periods of time.

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FOR MORE INFORMATION

- American Heart Association
800/242-8721
www.americanheart.org
- National Heart, Lung, and Blood Institute
301/592-8573
www.nhlbi.nih.gov

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Sources: American Heart Association; National Heart, Lung, and Blood Institute

