Heart Disease: Restrictive Cardiomyopathy

If you have restrictive cardiomyopathy, it means part of your heart muscle has become stiff. This stiffness happens in the lower heart chambers, which are called the ventricles.

Normally, as your heart beats, the ventricles expand fully and fill with blood. This blood then gets pumped out to the body to supply it with oxygen and nutrients.

But with restrictive cardiomyopathy, the ventricles cannot stretch all the way to take in enough blood. So less blood is pumped out to the body. As it gets worse, heart failure develops.

What causes it?
Your doctor may not know what caused your restrictive cardiomyopathy. In many cases, the cause cannot be found. But certain conditions may lead to restrictive cardiomyopathy. It can happen if:

• You have a buildup of protein in the heart muscle. This is called cardiac amyloidosis.
• You have a buildup of iron in the heart muscle. This is called hemochromatosis.
• You have a condition that causes masses or bumps to form in the heart, lungs, or other organs. This is called sarcoidosis.
• You get radiation or chemotherapy treatments for cancer.
• You have a type of cancer called carcinoid syndrome.
• You have a buildup of certain white blood cells that can lead to scarring. This can be caused by Löeffler's syndrome or endomyocardial fibrosis.
• You have certain diseases you inherit from your family. Gaucher disease and Fabry's disease can lead to restrictive cardiomyopathy.

What are the symptoms?
You may not have any symptoms at first. Or you may have mild symptoms, such as feeling very tired or weak.

If your heart gets weaker, you will develop heart failure. When this happens, you will feel other symptoms, including:

• Shortness of breath, especially with activity.
• Tiredness.
• Trouble breathing when you lie down.
• Swelling in your legs.

How is it diagnosed?
Your doctor will ask how you have been feeling and about any health problems you have. He or she will give you a physical exam and will likely ask if anyone in your family has heart disease.
Make sure to tell your doctor about all the medicines you take. This includes medicines you can buy without a prescription (over-the-counter), vitamins, or herbal treatments.

Your doctor will check your legs for fluid buildup. He or she may order a chest X-ray to look for fluid in your lungs and may do an echocardiogram or other tests to see how your heart is working. You may also have blood tests.

Your doctor may want to test a small sample of your heart tissue. This is to make sure you do not have a different heart problem that is causing your symptoms. This test can be done at the same time as a cardiac catheterization. It is one of the tests used to check how your heart is working.

How is it treated?
Treatment focuses on relieving symptoms, improving heart function, and helping you live longer. You may also have other treatment for the problem that is causing restrictive cardiomyopathy.

Medicines
Medicines can help improve blood flow and make it easier for your heart to pump blood. Your doctor may prescribe an ACE inhibitor, a "water pill" (diuretic), a beta-blocker, or other medicines.

Changes you can make on your own
You may need to limit how much salt (sodium) you get from food and drinks. And you will need to limit how much fluid you drink if your doctor tells you to. Ask your doctor how much sodium and fluid you can have each day.

Ask your doctor what kind and level of physical activity you can do safely. You may need to limit exercise.

Don't smoke. Limit the amount of alcohol you drink.

Keep track of your symptoms and call your doctor if they change suddenly or get worse.

Other treatment
Your doctor may suggest a mechanical device for you. You might get a pacemaker (also called cardiac resynchronization therapy, or CRT) to help your heart pump blood. Or you might get an ICD (implantable-cardioverter defibrillator) to help prevent dangerous heart rhythms.

What can you expect with restrictive cardiomyopathy?
It can be hard to treat restrictive cardiomyopathy because often the cause cannot be found. But if the cause is found and caught early, treatment can help. Medicines may be used to treat the cause. And treatment may limit some of the damage to the heart. But if the cause is hard to treat or not known, restrictive cardiomyopathy usually leads to heart failure over time.

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