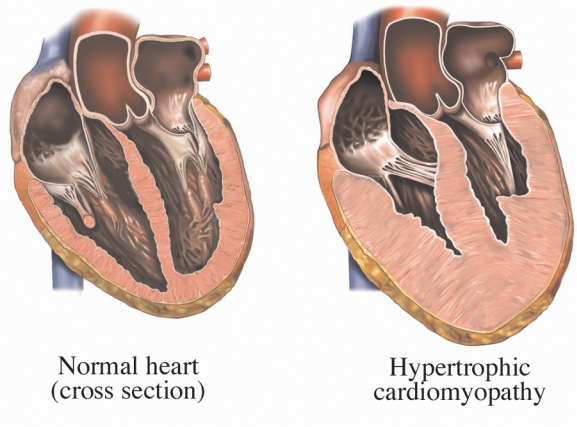
Heart Disease: Hypertrophic Cardiomyopathy



If you have hypertrophic cardiomyopathy, it means your heart muscle has grown too thick. The thickened heart muscle can make it hard for the heart to pump blood well. It also can affect the heart's electrical system. This increases the risk for irregular heartbeats.

In some cases, the heart muscle cannot relax between heartbeats or fill with blood as it should. So the heart muscle itself does not get enough blood or oxygen.

What causes it?

Experts think hypertrophic cardiomyopathy is a genetic disease. This means people who have it carry certain genes. Genes are like a recipe. They tell your cells what to do to make tissues and organs. These genes cause heart muscle fibers to grow in a way that is not normal. Many people have it because it runs in families. Others have it because something causes the genes to change in a way that is not normal.

What are the symptoms?

Most people do not have symptoms, even when they have had this condition for a long time. Some people only find out they have hypertrophic cardiomyopathy when they start having trouble breathing. They may feel dizzy and have rapid, thumping heartbeats (palpitations). They may have chest pain, especially during exercise.

If hypertrophic cardiomyopathy is severe, heart failure may develop. Symptoms include fatigue; dizziness; fluid buildup in the legs, ankles, and feet; trouble breathing while lying down or exercising; and needing to go to the bathroom more at night.

People with hypertrophic cardiomyopathy have a risk of dying suddenly because of irregular and fast heartbeats or a sudden drop in blood pressure. Some young athletes who die suddenly are found to have hypertrophic cardiomyopathy.

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.

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 electrocardiogram or echocardiogram or other tests to see how your heart is working.

How is it treated?

If you do not have any symptoms, you may not need treatment. But you will need to see your doctor for regular checkups.

Some people may develop atrial fibrillation, an irregular and fast heart rhythm. Some people develop heart failure. If this happens, your doctor may suggest medicines and/or medical procedures to help treat these problems.

People with hypertrophic cardiomyopathy have a risk of dying suddenly. If a doctor believes your risk is higher than most people's, he or she may recommend an implantable cardioverter-defibrillator, or ICD. The ICD is placed under the skin, usually below the left collarbone. A wire threaded through a large vein connects the device to the heart.

The ICD checks for irregular heart rhythms that could cause serious problems. When needed, the ICD gives an electric shock to the heart to create a normal rhythm.

How can you live with hypertrophic cardiomyopathy?

Your doctor can help you with a plan for eating, exercise, and other healthy habits.

- Because of the risk of sudden death, avoid heavy activity and intense exercise. You may not be able to play competitive sports. With your doctor's okay, mild exercise may be good for you.
- Eat a heart-healthy diet that includes lots of vegetables, fruits, and whole grains.
- Don't smoke. Tobacco use raises the risk of coronary heart disease, which can lead to a heart attack.
- Limit alcohol. Long-term overuse of alcohol may raise the risk of developing certain heart problems.

Your doctor will want to see you for regular visits to check on your heart and your health in general.

Questions to ask your doctor

Use the space below to list your questions or concerns. Take this sheet with you to your next doctor visit.

Questions about hypertrophic cardiomyopathy:

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