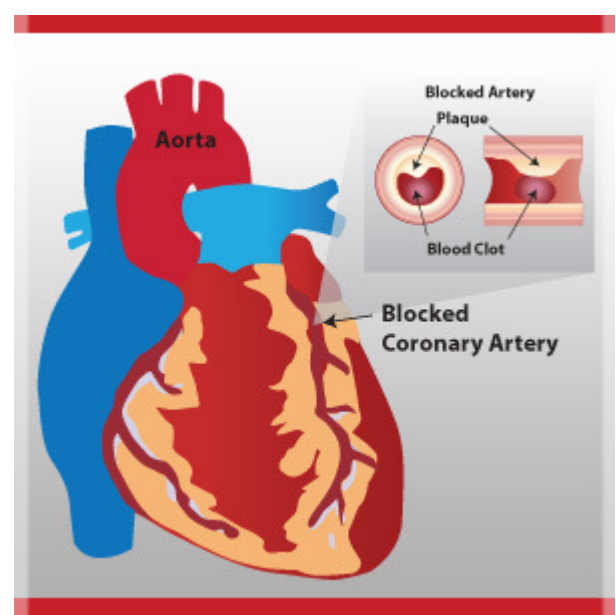


ACUTE MYOCARDIAL INFARCTION



Aspirin? GTN? Pain scores? Analgesia? What good are we doing?

- **Aspirin:** 'Clinical studies demonstrate that early treatment with aspirin *reduces mortality* and reinfarction rates in patients with unstable angina and Acute Myocardial Infarction'¹ - so these patients actually live longer if they are given aspirin!
- **GTN:** Nitrates such as Glycerol Trinitrate dilate blood vessels producing fast relief to a patient with a clot lodged in one of their coronary arteries. They also reduce preload and afterload.²
- **Pain Scores:** 'Recording pain scores is valuable, not only because it is a simple method of assessing pain, but because it has been shown to increase the likelihood of administration of analgesia and is a practical Estimate of the effectiveness of treatment'³
- **Entonox** has been shown to produce a fall in cardiac output and stroke volume⁴ thus reducing the heart's demand for oxygen—this is an obvious benefit for an ischaemic heart
- **Morphine** is used as an analgesic, anxiolytic and vasodilator for Acute Coronary Syndrome. It may decrease heart rate and blood pressure, with subsequent reductions in myocardial oxygen demand.²

References:- 1. 'Prehospital Administration of Aspirin in Patients With Unstable Angina and Acute Myocardial Infarction' *Mark Einsberg and Eric Topol* 2. 'Cardioprotection in the Emergency Department: Part II' *Michael Plewa, Kevin Casey and Randall King* 3. 'Exploratory cross-sectional study of factors associated with pre-hospital management of pain' *Niroshan Siriwardena, Deborah Shaw and George Bouliotis* 4. 'Nitrous oxide in emergency medicine' *I O'Sullivan and J Bengler*

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