

SLOUCHING CAUSES SHARP PAIN IN CHEST

Patient's Query:

I am a 25 year old male. When I slouch while sitting for prolonged periods, I get a sharp throbbing pain in my left chest area. It happens intermittently and disrupts my work, distracting me for approximately 15 minutes each time. I exercise regularly, but my family has a history of heart attacks. Is this something that I should be worried about?

Dr Tan's Advice:

The chest pain you have is probably a result of the way you sit, especially for prolonged period of time, rather than of a serious heart condition. Your symptoms do not fit into any of the serious cardiovascular conditions that can present with chest pain.

It is fair for you to wonder if there is a possibility that the chest pain is a warning sign of an imminent heart attack, especially as you have a family history of heart disease. However, the pain that a heart attack engenders is typically severe, of a tight, squeezing or constricting sensation. It is felt in the centre of the chest, radiating to the neck or arm with sweating, nausea, vomiting, dizziness and breathlessness. It will persist for at least 15 to 20 minutes and may last for hours.

Most patients who have suffered a heart attack will have had angina pectoris for many years prior. Angina pectoris is a milder and more stable form of the same underlying condition and can also present as chest pain. The pain of angina pectoris is similar to that of a heart attack but it is of a shorter duration, lasting only a few minutes. Typically, the pain is brought on by exertion and relieved by rest and not associated with other symptoms like sweating, nausea or vomiting.

The character of the pain you described is not like that of a heart attack or of angina pectoris. More importantly, although you are at a higher risk of having a heart attack later in life due to your family history, the risk of you having these conditions at your age is extremely low.

There are other rare heart or circulatory conditions, such as inflammation of the heart, inherited heart muscles or valves diseases, disease of the aorta or clots in the vessels of the lungs that can cause chest pain. However, the description of your chest pain again does not fit into any of these serious conditions.

Nevertheless, if the chest pain is troubling you and is interfering with your work, you should have the cause of your chest pain investigated by a cardiologist and, in particular, to ensure that you do not have any of the above serious heart conditions.

The heart evaluation usually include:

- a clinical examination
- an electrocardiogram to look at the electrical pattern of your heart
- an echocardiogram to look at the structure and function of your heart
- an exercise treadmill test to check for any possibility of blockages of your heart arteries
- a CT scan of your heart to confirm if there are any heart artery blockages with a high degree of accuracy

Once a serious heart condition has been 'ruled out', other possible causes to your pain, relating to the neck or spine, lungs, chest wall or food pipe can be look into.

In the meantime, you can examine if your sitting posture, the way you slouch, or the position of your neck and your upper limbs during prolonged sitting are putting unnecessary strain on your upper torso or shoulders. You can also try to get up and move around more frequently and not sit for too long at a time to see if these will relieve your symptoms.

Dr Tan's reply was published in The Straits Time Mind Your Body on 7 June 2016.