

What is the etiology of cardiac syndrome X?

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Non-cardiac chest pain remains a widespread symptom especially in western countries with a significant economic burden. Patients with chest pain and abnormal electrocardiographic (ECG) but normal coronary angiogram (i.e. exclusion of coronary heart disease) is termed Cardiac syndrome X (CSX) and represents a specific subform of non-cardiac chest pain. While etiology of non-cardiac chest pain has been studied in several projects, it is unclear in what extent CSX is based on disorders of the upper gastrointestinal disorder (GI) tract. A research group in Aachen, Germany, interviewed 119 patients with abnormal ECG findings after having received a normal coronary angiogram.

Their result will be published on November 14, 2008 in the *World Journal of Gastroenterology*. The research team led by Dr. Christoph. Dietrich from Medizinische Klinik II in Germany interviewed 119 patients with abnormal ECG findings after having received a normal coronary angiogram. Surprisingly, almost 30 % of patients did not exhibit typical chest pain anymore as they had before the diagnostic procedure.

On the other hand, 97 % of still symptomatic patients undergoing gastroenterological workup, had signs of acid-related disorders of the upper GI tract including reflux esophagitis and gastritis. Unlike in many patients with general non-cardiac chest pain, motility disorders of the esophagus do not seem to play a role in CSX. Treatment with proton pump inhibitors led to a significant improvement of symptoms with a considerable amount of symptom-free patients.



They concluded that in patients with CSX, acid-related disorders are frequent and respond very well to a long-term therapy with pantoprazole. This study emphasizes the need of further diagnostic work up for this special patient group which suffers from serious pain attacks mostly over a period of several years.

Source: World Journal of Gastroenterology

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