

Management of Medical Emergencies in Dental Practice
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Lecture 12
Chest Pain – Clinical Scenario

Chest pain can be caused due to various reasons like trauma, gastro esophageal reflex, or can be due to cardiac origin, such as angina pectoris or myocardial infarction.

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In this video, we are going to see how to manage chest pain of cardiac origin. Angina pectoris is defined as a characteristic thoracic pain, usually substernal, precipitated chiefly by exercise, emotion, or a heavy meal, relieved by vasodilator drugs, and a few minutes rest. And as a result of a moderate inadequacy of the coronary circulation, myocardial infarction is usually characterized by severe and prolonged substernal pain, similar to but more intense and of longer duration than that of angina pectoris.

The symptoms of acute myocardial infarction include severe to intolerable pain, crushing, choking and retrosternal prolonged for more than 30 minutes, which may radiate to the left arm hand, epigastrium shoulders, neck or the jaw. Ideally, if there is no previous history of chest pain, we should suspect it as myocardial infarction and treat accordingly.

The management of myocardial infarction in a dental office include the administration of morphine for pain control, supplemental oxygen therapy, nitroglycerin; sublingually, if the patient is conscious or intravenous route of administration should be used, if the patient is unconscious; and aspirin for antiplatelet effect. After emergency management in the dental office, the patient should be sent to a tertiary care unit for definitive care.