

# Cardiomyopathy

## What is cardiomyopathy?

Cardiomyopathy is a condition in which your heart muscle becomes inflamed and enlarged. Because it is enlarged, your heart muscle is stretched and becomes weak. This means it can't pump blood as fast as it should. If your heart muscle becomes too weak, you may develop heart failure (a serious condition that needs special treatment).<sup>\*</sup>

Most people are only mildly affected by cardiomyopathy and can lead relatively normal lives. However, people who have severe heart failure may need a heart transplant.<sup>†</sup>

Cardiomyopathy is different to a heart attack. Heart attacks also damage part of your heart muscle, but may be caused by something else.

## What causes cardiomyopathy?

Generally, there are four things that are known to cause cardiomyopathy.

- **Viral infection.** A common cause of cardiomyopathy is a viral infection in your heart. The infection can damage your heart muscle, but the damage may not show for months or longer.
- **Alcohol.** Drinking more than the recommended amount of alcohol (two standard drinks a day for healthy Australians) can damage your heart and liver. Some people may be more sensitive to alcohol than other people. Sometimes damage to your heart can be reversed if you stop drinking alcohol completely. Talk to your doctor if you have any questions about your health and drinking alcohol.
- **Family history.**<sup>‡</sup> If you have a family history of cardiomyopathy (when more than one of your relatives has cardiomyopathy and the cause is not known), your chances of developing it can increase. All members of your family should be checked by a cardiologist.
- **Heart attack.** One or more heart attacks can cause ischaemic cardiomyopathy. Heart attacks can severely damage your heart muscle – and the more heart attacks you have, the worse the damage is. Scar tissue forms where your heart muscle is damaged. Scar tissue in your heart doesn't contract like normal heart muscle does, so the rest of your heart has to work harder. This makes the healthy parts of your heart muscle tired and weak.

While tests can't always tell us what causes cardiomyopathy, it can be treated effectively.

<sup>\*</sup> If you want to know more about heart failure, see our booklet *Living well with chronic heart failure* or call our Health Information Service on 1300 36 27 87.

<sup>†</sup> If you want to know more about heart transplants, see our information sheet *Heart transplants and organ donation* or call our Health Information Service on 1300 36 27 87.

<sup>‡</sup> This information sheet does not deal with familial hypertrophic cardiomyopathy. If you want to know more about familial hypertrophic cardiomyopathy, see our information sheet *Familial hypertrophic cardiomyopathy* or call our Health Information Service on 1300 36 27 87.

## What are the symptoms of cardiomyopathy?

Some people with cardiomyopathy don't have any symptoms. However, if you have cardiomyopathy and your heart isn't working properly, you may have heart failure symptoms. These include breathlessness, tiredness, and swelling in your legs and abdomen due to fluid building up.

## How can I find out if I have cardiomyopathy?

You can have several tests to diagnose cardiomyopathy. Tests include a chest X-ray, an echocardiogram (ultrasound of the heart), blood tests and a physical examination.

If you think you might have cardiomyopathy, or someone in your family does and you want to find out if you have it too, talk to your doctor.

## What can be done about cardiomyopathy?

You can manage cardiomyopathy and improve your health by taking medicines, having treatments to relieve symptoms, and making a few simple lifestyle changes.

### Medicines

There are several medicines used to treat cardiomyopathy.

- **ACE inhibitors** block the effects of some hormones that affect your blood pressure to dilate your blood vessels, which help to reduce your heart's workload.
- **Fluid pills (diuretics)** help to rid your body of excess fluid. Some cause potassium loss, so you may need to take a potassium supplement.
- **Beta-blockers** block the effect of nerves that act on your heart and other parts of your body to lower your heart rate and blood pressure, which reduces your heart's workload.
- **Digitalis (digoxin)** helps your heart to pump more efficiently and helps to regulate an abnormal heart rhythm (arrhythmia).
- **Anti-coagulant (warfarin)** thins your blood to prevent it clotting. You will need regular blood tests to monitor this medicine and its effect on your body.
- **Rhythm control drugs (antiarrhythmics)** help to control your heart's rhythm.
- **Other medicines** may be needed depending on your needs. For example, if you get angina, you may need to take nitroglycerine spray or tablets.<sup>§</sup>

### Surgical treatments

Surgery may be the best treatment for some types of cardiomyopathy, such as familial hypertrophic cardiomyopathy (an inherited type of cardiomyopathy where your heart muscle has severe thickening).

<sup>§</sup> If you want to know more about angina, see our booklet *Angina* or call our Health Information Service on 1300 36 27 87.



Some people with cardiomyopathy have an arrhythmia. If you get a serious type of arrhythmia called 'ventricular tachycardia' (VT), you may need to have an implantable cardiac defibrillator (ICD).<sup>\*\*</sup> An ICD is a small device that is put into your chest and connected to your heart during an operation. If your heart starts beating abnormally, an ICD gives it an electric shock to start it beating normally again.

Bi-ventricular pacemakers are another device that may be used to make your heart beat normally. You will also need an operation to put a bi-ventricular pacemaker into your chest and connect it to your heart.

Although rare, sometimes cardiomyopathy can cause sudden (over a few days), severe and life-threatening heart failure. If this happens, you will be put in hospital in intensive care and given treatment that may include using a heart and lung machine.

A very small number of people will need a heart transplant.<sup>††</sup>

## Lifestyle

As well as taking your medicines as prescribed and having surgical treatment, you can help to reduce the effects of cardiomyopathy and your risk of more heart problems by making some simple lifestyle changes.

### Be smoke-free

Quitting smoking is one of the most important things you can do to reduce your risk of further heart disease.

Smoking affects the arteries that supply blood to your heart and other parts of your body. It reduces the amount of oxygen in your blood and damages your artery walls. Smoking increases your risk of heart attack, stroke and peripheral arterial disease (which can lead to gangrene and limb amputation). Smoking also greatly increases your risk of serious lung disease, such as emphysema and cancer.

Breathing in other people's smoke (second-hand smoke) is also harmful.

Quitting smoking can be hard at first but, like learning to ride a bike or drive a car, you can do it with planning, practice and help. Call the Quitline on 13 QUIT for information and advice about quitting smoking.

### Eat less salt

Salt causes your body to retain fluid, which can build up and put more strain on your heart.

To reduce the amount of salt that you eat:

- eat plenty of fresh fruit and vegetables
- when shopping, choose foods labelled 'no added salt', 'low salt' or salt-reduced' where possible
- avoid highly salted seasonings, processed foods and take-away foods that are high in salt
- use garlic, herbs and spices instead of salt
- avoid adding salt during cooking or at the table.

<sup>\*\*</sup> If you want to know more about ICDs, see our information sheet *Implantable cardiac defibrillators (ICDs)* or call our Health Information Service on 1300 36 27 87.

<sup>††</sup> If you want to know more about heart transplants, see our information sheet *Heart transplants and organ donation* or call our Health Information Service on 1300 36 27 87.



### **Limit alcohol**

Alcohol can damage your heart. Talk to your doctor about how much alcohol you drink. One drink a day may be okay if you have mild cardiomyopathy. However, your doctor may recommend that you reduce the amount of alcohol you drink, or stop drinking alcohol altogether.

### **Do regular physical activity**

Your body is designed to move. Regular, light- to moderate-intensity physical activity is good for your heart and is a great way to have fun. Try to do some type of physical activity, such as going for a walk, cycling, lifting light weights and stretching, every day.

Do what you can without getting breathless or overtired. You should be able to talk easily while doing physical activity.

Talk to your doctor about the type and level of physical activity that is suitable for you. Avoid strenuous activities unless your doctor has approved them.

### **Remember...**

- Cardiomyopathy can be treated effectively. Work closely with your doctor to find the best treatment for you.
- To help to manage the symptoms of cardiomyopathy and reduce your risk of more heart problems, take your medicines as prescribed by your doctor and follow a healthy lifestyle.

### **Further information**

For general information on anything we've mentioned in this information sheet, or if you have general heart health questions, call our Health Information Service on 1300 36 27 87 (for the cost of a local call) or email [health@heartfoundation.org.au](mailto:health@heartfoundation.org.au).

For more specific information about cardiomyopathy, contact:

**Cardiomyopathy Association of Australia**

Phone: 1300 552 622

Email: [info@cmaa.org.au](mailto:info@cmaa.org.au)

Website: [www.cmaa.org.au](http://www.cmaa.org.au)

© 2010 National Heart Foundation of Australia ABN 98 008 419 761  
INF-005-C

**Terms of use:** This material has been developed for general information and educational purposes only. It does not constitute medical advice. Please consult your health care provider if you have, or suspect you have, a health problem. The information contained in this material has been independently researched and developed by the National Heart Foundation of Australia and is based on the available scientific evidence at the time of writing. It is not an endorsement of any organisation, product or service. While care has been taken in preparing the content of this material, the National Heart Foundation of Australia and its employees cannot accept any liability, including for any loss or damage, resulting from the reliance on the content, or for its accuracy, currency and completeness. This material may be found in third parties' programs or materials (including but not limited to show bags or advertising kits). This does not imply an endorsement or recommendation by the National Heart Foundation of Australia for such third parties' organisations, products or services, including these parties' materials or information. Any use of National Heart Foundation of Australia material by another person or organisation is done so at the user's own risk.