

Silent Signals: Decoding Chest Pain with a Homoeopathic Lens Understanding Chest Pain-a Warning Sign of Non-Communicable Diseases

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“UNDERSTANDING CHEST PAIN-A WARNING SIGN OF NON-COMMUNICABLE DISEASES”

Abstract—Chest pain is a very common complaint and, in many cases, it is caused by harmless conditions. However, sometimes it can signal a life-threatening medical emergency. Chest pain can arise from issues not just in the chest, but also from problems in the abdomen or other internal organs. When evaluating chest pain, its essential to rule out less serious causes while being quick to identify and treat those that could be dangerous. [1] Non communicable diseases are long term illnesses like heart disease, diabetes, cancer, and chronic respiratory diseases that doesn't spread from person to person. They are usually caused by lifestyles such as poor diet, lack of exercise and smoking etc. Chest pain is one among those non communicable diseases which is most commonly seen in youth these days. In this article, we will explore the many faces of chest pain –what it means, when to worry, and how to respond.

I. INTRODUCTION

“Chest Pain-Just hearing the words can spark worry, even fear”. Usually, it is pain or discomfort in the areas lying between the neck and belly region. It may be of sharp or dull type. It might be on and off or you may feel the pain continuously. [2] - “While chest pain can be a sign of something as serious as heart attack, it can also stem from less alarming causes like muscle strain, acid reflux or anxiety” [3]. It is always so important to tell the difference between two types of chest pain which is emergent and non emergent. Some people may rush to get checked for even mild symptoms,

knowing that chest pain could be a warning sign of something serious. Everyone experiences pain differently which is usually depended upon the cause. So chest pain should never be dismissed until there is a clear and confirm reason behind it.

<p>1.PSYCHIATRIC CAUSES</p> <ul style="list-style-type: none"> • Anxiety • Panic disorder
<p>2.CARDIAC CAUSES</p> <ul style="list-style-type: none"> • Myocardial ischemia (Angina) <ul style="list-style-type: none"> • Myocardial Infarction • Infective Endocarditis <ul style="list-style-type: none"> • Myocarditis • Pericarditis • Mitral valve prolapse
<p>3.AORTIC CAUSES</p> <ul style="list-style-type: none"> • Aortic dissection • Aortic aneurysm
<p>4.OESOPHAGEAL CAUSES</p> <ul style="list-style-type: none"> • Gastro esophageal reflux disease <ul style="list-style-type: none"> • Esophagitis • Esophageal spasm • Mallory Weiss Syndrome
<p>5.LUNGS/PLEURA</p> <ul style="list-style-type: none"> • Bronchospasm • Pulmonary embolism <ul style="list-style-type: none"> • Malignancy • Pulmonary infarct • Pneumothorax • Connective tissue disorder
<p>6.MUSCULOSKELETAL CAUSES</p> <ul style="list-style-type: none"> • Osteoarthritis • Rib fracture injury • Costochondritis (Tietze's syndrome)

<ul style="list-style-type: none"> • Intercostal muscle injury
<p>7.NEUROLOGICAL CAUSES</p> <ul style="list-style-type: none"> • Prolapsed intervertebral disc • Thoracic outlet syndrome

II. ETIOLOGY

These are few common causes of chest pain [4]:

➤ PSYCHIATRIC CAUSES:

- PANIC DISORDER:
 - Panic disorder usually starts in adolescents of age between 15 and 19 years. Usually, starts in pre-pubertal children [5]
 - Panic attacks would often cause rapid, shallow breathing which eventually leads to respiratory alkalosis which causes vasoconstriction and thus it leads to chest pain.
 - An episode of panic attack lasts about 10-30 minutes.
- ANXIETY:
 - When a person experiences anxiety, the nervous system shifts into flight or fight mode, releasing adrenaline.
 - This can lead to muscle tension, rapid heartbeat, hyperventilation and increased oxygen demand which will eventually cause a tight, sharp, or pressing pain in the chest.

➤ CARDIAC CAUSES:

- MYOCARDIAL ISCHEMIA (ANGINA)[6]:
 - This usually occurs when the blood supply could not meet the metabolic needs of the body.
 - Types
 - Classic-Heavy, tight or gripping central or retrosternal pain which will radiate to jaw and left shoulder.*
 - Atypical Angina*
 - Stable Angina*
 - Unstable Angina*-This usually refers to the angina of recent onset. (Less than 24hrs). Generally, symptoms occur during rest.
 - Refractory Angina*- In this type of angina, medical intervention cannot be helped. As these patients, will be suffering with severe coronary disease in whom revascularization is not possible.
 - Prinzmetal Angina*-This angina refers to pain that occur during rest, caused due to coronary artery spasm.

vii. *Microvascular Angina*- This angina refers to exercise induced angina which is usually seen in normal or unobstructed coronary arteries.

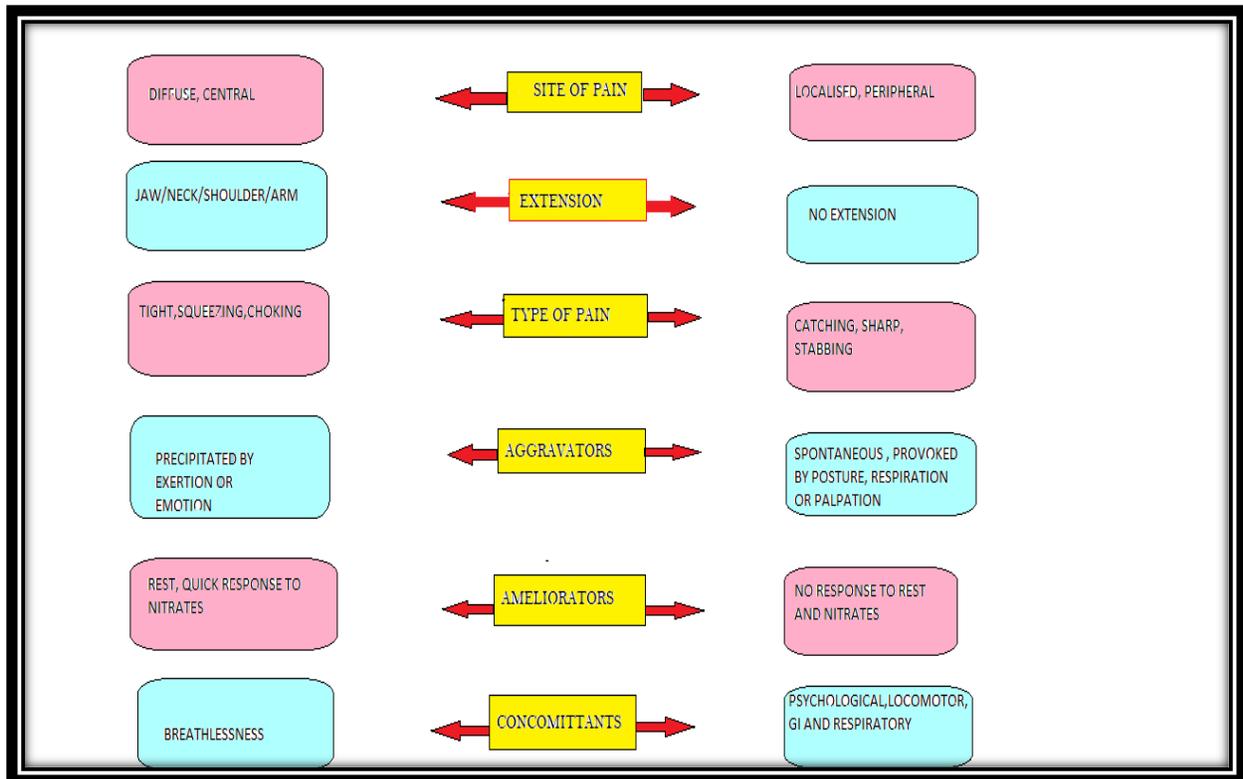
- MYOCARDIAL INFARCTION [7]
 - Myocardial infarction is usually by myocardial ischemia which eventually leads to the myocardial necrosis.
 - This necrosis is usually caused by decreased blood supply to the myocardium.
 - TYPES: Unstable angina, STEMI, NSTEMI
- PERICARDITIS [6]:
 - It is of two types- Acute & Chronic
 - Acute Pericarditis- It is usually caused by inflammation of pericardium which will present as emergency chest pain due to bacterial, viral infections or primary tumors of the heart.
 - Chronic Pericarditis- When acute pericarditis is continuously relapsing, it turns into chronic pericarditis. It usually lasts more than 3 months.
- AORTIC CAUSES:
 - AORTIC DISSECTION:
 - It is a serious and life-threatening condition in which a tear occurs in the inner layer of the aorta which is a large artery that carries blood from heart to the rest of the body.
 - This tear eventually leads the blood to go in between the aortic layers, forcing them apart.
 - Pain in this condition is sudden, severe chest or upper back pain which is tearing or ripping in nature.
 - AORTIC ANEURYSM:
 - This condition occurs when the main artery, that is carrying blood from the heart becomes weak and bulges outwards like a balloon.
 - There are two main types of aortic aneurysm:
 - Thoracic Aortic Aneurysm*
 - Abdominal Aortic Aneurysm*
 - This condition has a fatal outcome which is of sudden, intense chest pain due to heavy internal bleeding.
- OESOPHAGEAL CAUSES:
 - GASTRO OESOPHAGEAL REFLUX DISEASE [4]
 - GERD mainly arises due to the incompetence of lower esophageal sphincter.
 - When there is loss of tone of lower esophageal sphincter, it leads to the reflux of the gastric

contents into the esophagus which eventually leads to heartburn and pain in chest.

- MALLORY-WEISS SYNDROME:
 - It is a condition characterized by tear in the gastro-esophageal junction due to sudden increase in intra-abdominal pressure which is usually associated with severe vomiting and eating disorders.
 - Thus, this condition eventually leads to epigastric or retrosternal pain.
- RESPIRATORY CAUSES
 - PLEURISY/PLEURITIS^[8]
 - This condition is usually caused by Pneumonia and Pulmonary embolism which will lead to the inflammation of pleura.
 - The symptoms include sharp, stabbing pain in chest which increases on deep breathing/coughing.
 - PULMONARY EMBOLISM^[8]
 - It is a condition caused due to sudden blockage of pulmonary arteries often from Deep vein thrombosis.

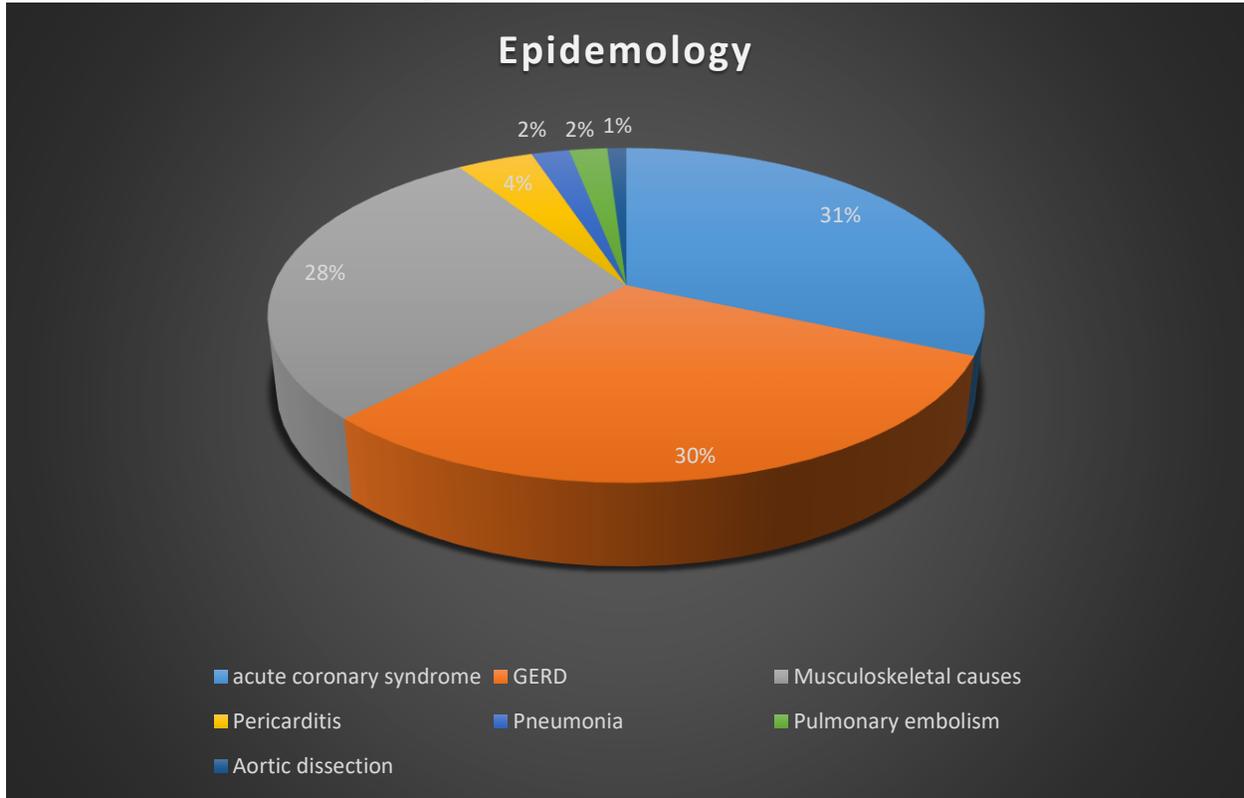
- Symptoms may include dyspnea, tachypnea and sudden pain in the chest.
- MUSCULOSKELETAL CAUSES:
 - COSTOCHONDRITIS (TIETZE'S SYNDROME):
 - This is the inflammation of either one or more costosternal joints without swelling.
 - Symptoms include localized anterior chest wall pain which worsens on deep breathing.
 - RIB FRACTURE INJURY:
 - This condition is usually caused by traumatic injury to one or more ribs which will lead to localized chest pain which worsens on deep breathing and movement.
- NEUROLOGICAL CAUSES:
 - PROLAPSED INTERVERTEBRAL DISC:
 - It is a condition caused due to herniation of nucleus pulposus through the annulus fibrosus of an intervertebral disc which eventually leads to compression of the adjacent nerve roots.
 - Symptoms may include mild chest pain along with localized back and neck pain.

ISCHAEMIC CARDIAC CHEST PAIN vs NON CARDIAC CHEST PAIN

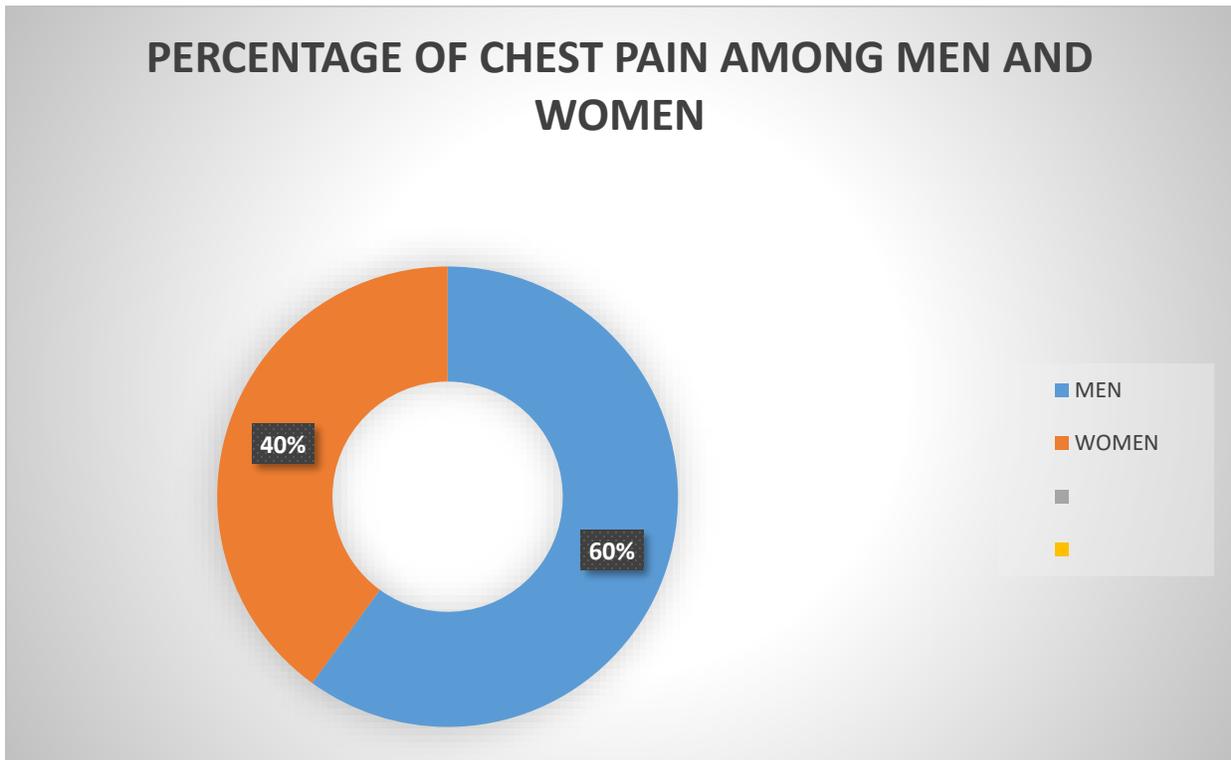


EPIDEMIOLOGY [9]

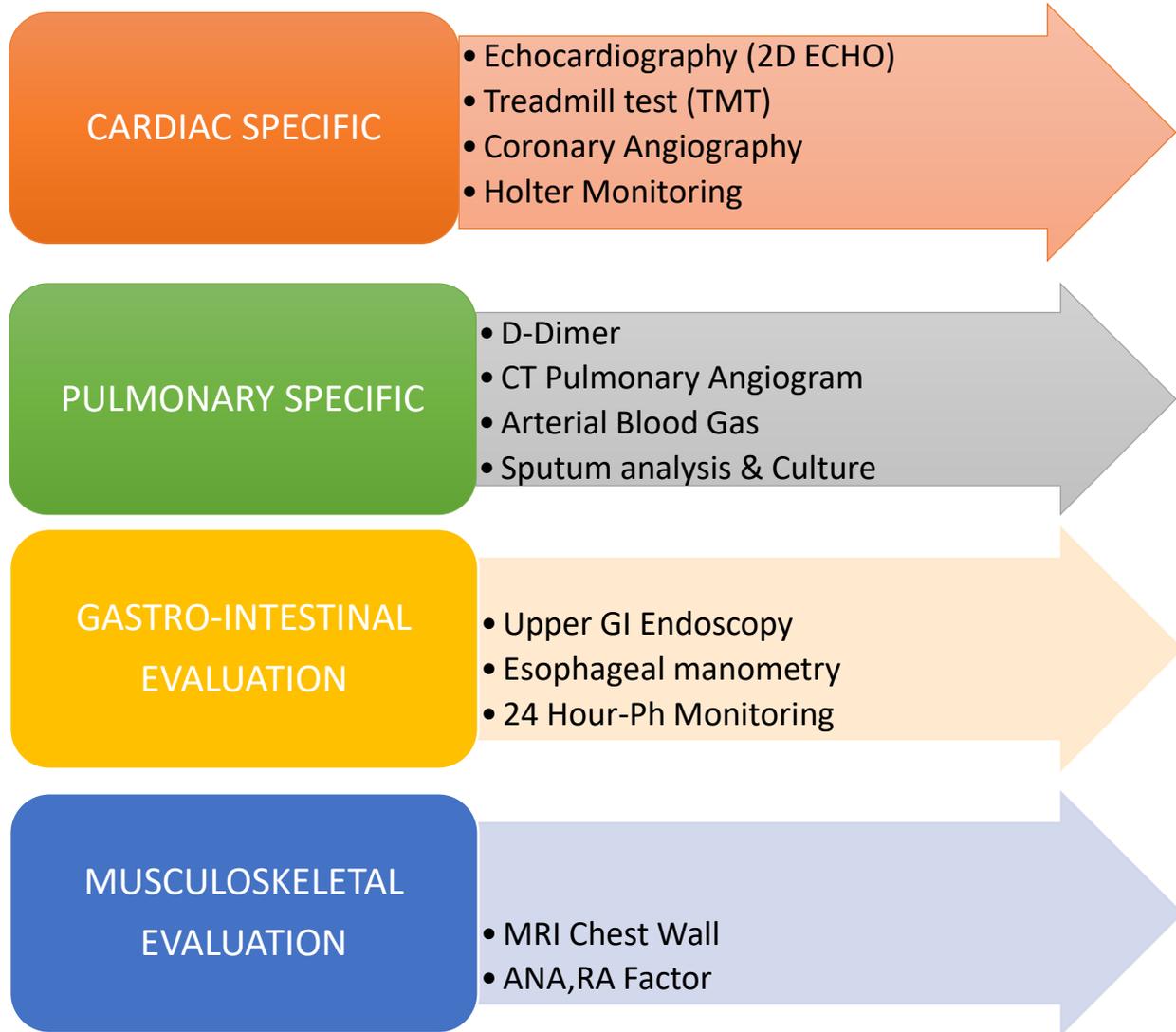
Percentage of common causes of chest pain in India:



PERCENTAGE OF CHEST PAIN AMONG MEN AND WOMEN IN THE WORLD [8]



INVESTIGATIONS:



HOMOEOPATHIC APPROACH

“BEYOND SYMPTOMS, HOMOEOPATHY SEES THE SOUL”

1. IBERIS AMARA ^[10]

- Cardiac pain with fluttering, sharp chest pains and skipped beats.
- Useful in chronic cardiac conditions with chest pain and irregular pulse.

• MODALITIES

- Aggravation-Lying Down

2. CONVALLARIA MAJALIS ^[10]

- Chest pain with sensation of fullness and oppression, specially in cardiac valvular disease during menopause

- “Heart feels as if over-worked”

• MODALITIES:

- Aggravation-Warm room

- Amelioration-Open Air

3. ACONITUM NAPELLUS ^{[10], [11]}

- Sudden, violent, severe pain in chest usually after coming in, from the cold wind or after fright.

- Patient is restless, anxious and has a fear of death.

- Patient says, “I don’t think I am going to make it!”

- Agony - intense fear with acute complaints

• MODALITIES

- Aggravation: Night, mainly around midnight.

- Amelioration-Fresh air and sitting up

4. SPIGELIA ^{[12], [13]}

- Neuralgic, stitching, shooting pain in the cardiac area.

- It can extend to the left arm.
- It is the most used remedy in Angina Pectoris
- MODALITIES:
- Aggravation-Motion, bending forward, Touch, lying on left.

5. CACTUS GRANDIFLORUS^{[10], [14]}

- Feeling of constriction as if heart is bound by an iron band.
- Ideal for ischaemic heart pain.
- Palpitation, suffocation and worry.
- MODALITIES
- Aggravation-Lying, Night
- Amelioration-Sitting up, fresh air.

6. ARSENICUM ALBUM^{[10], [14]}

- Burning chest pain with intense weakness and restlessness.
- Patient is anxious, chilly and rests frequently.
- Patient says, "There is burning in my chest and I might feel collapse"
- MODALITIES:
- Aggravation-Night (1-2 AM), Lying
- Amelioration-Warmth, Sips of warm liquid.

7. BRYONIA ALBA^{[10], [14]}

- Sharp stitching pain in the chest, particularly on movement or deep breathing.
- Patient desires to remain still and not to talk
- Patient says, "Every breath feels like a knife in my chest. Please don't let me move"
- MODALITIES:
- Aggravation-Slightest motion, cough, deep breath
- Amelioration -Lying on painful side, Pressure.

8. KALIUM CARBONICUM^{[11], [14]}

- Stitching chest pain at lower right side of the chest, usually at 3 AM, accompanied by weakness and backache.
- Best for patients who are stiff, dutiful, usually hold things together for other people.
- MODALITIES
- Aggravation-3AM.

9. LACHESIS MUTUS^{[13], [14]}

- Oppression of chest, cannot tolerate anything tight around neck or chest.
- Pain may radiate to left side, and there is severe suffocation after sleep.
- Patient says, "I feel like I will suffocate if I don't sit up, I need room to breathe."

• MODALITIES:

- Aggravation-After sleep, Warm room
- Amelioration-Discharges, Open air

10. PHOSPHOROUS^{[10], [11]}

- Burning, raw pain in chest, usually due to pneumonia or pleurisy
- Patient is sensitive, loving and wants comfort and companionship.
- Patient says, "It burns in my chest and I feel so tired and lonely."

• MODALITIES:

- Aggravation-Lying on left side
- Amelioration-Cold drinks, Cold beverages

11. RHUS TOXICODENDRON^{[10], [14]}

- Chest pain, after overexertion, exposure to cold damp weather.
- There is stiffness, restlessness and relief from motion.

• MODALITIES:

- Aggravation-On first motion
- Amelioration-Continued gentle motion

12. CARBO VEGETABILIS^{[10], [13]}

- Coldness, collapse, faintness and breathlessness.
- The patient looks blue, cold and is gasping for air.
- Ideal in emergency conditions such as Shock, Heart failure or Postoperative collapse.
- Boericke- 'Also called it as Corpse Reviver'
- MODALITIES
- Aggravation-Night, Open air, Cold
- Amelioration-Fanning.

13. LAUROCERASUS^[13]

- Chest pain with cyanosis, weak pulse, coldness of extremities, air hunger, fainting
- Noted for the symptoms of heart failure with pain in the chest and suffocation
- MODALITIES
- Aggravation-Exertion, cold, fright, stooping, sitting up
- Amelioration-Open air, lying with head low, sleep

"No two hearts ache alike-neither should their remedies!"

"Individualization is the master key, unlocking the exact door to healing".

III. CONCLUSION

Chest pain is'nt always a scream-It can be a soft cry, a hidden danger, a signal masked in a silence. Through a Homoeopathic lens, every pain has a story and every story deserves to be heard.

Sometimes, it's the Heart's cry-A deep ache from emotional stress, grief or cardiac strain. Other times it is the stomach's mistake- Acid rising, digestion disturbed. There are moments when lungs whimper-Tight breath, a suppressed cough, quietly calling out for relief. Or the muscle's complaint- A simple strain or spasm, made louder by fatigue or posture. Moreover, it could also be the mind's manifestation-Anxiety, fear and panic.

Homoeopathy doesn't ask, "Where does it hurt?-It gently asks, why does it hurt? What else is going inside you?" It sees the person behind the pain by connecting your emotional and mental state, it offers path not just to treatment-but to true healing.

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