

Chest Pain

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Types of chest pain

There are several different types of chest pain you might experience following a COVID-19 infection. Some of these include:

Type of Chest Pain and What it Feels Like and Cause

Non-specific chest pain

- Can be felt anywhere in the chest
- There can be many feelings of pain, such as sharp, dull, or squeezing

Musculoskeletal (bone/muscle) chest pain

- Often felt in a small area or can be widespread muscle soreness (myalgia)
- The pain may get worse with specific movements such as stretching

Pleuritic chest pain

- Sometimes caused by irritation of the heart or lungs
- Felt on both or just one side of chest
- Sharp, worse when breathing in

Angina type chest pain

- Caused by poor blood flow to the heart muscle
- A tightness or heaviness in your chest that may extend to arms, neck, and jaw
- Gets worse with stress or physical exertion and gets better with rest



When to seek medical help for your chest pain?

Each type of chest pain can be serious, and you should always see a doctor if this is the first time you are experiencing this chest pain or your chest pain becomes more frequent.

Sometimes, chest pain can be an emergency and you should not wait to see a family doctor. Below are some of the clues that may indicate that you should go to the emergency department or call 9-1-1:

- You experience sudden chest pain which continues for 15 minutes
- You experience sudden chest pain along with nausea, vomiting, sweating, or shortness of breath
- You experience sudden chest pain and loss of consciousness

If you are unsure whether your chest pain is an emergency, you can call 8-1-1 in B.C. to speak to a health services navigator.

What to discuss with a doctor

When you talk to a doctor about your chest pain, try your best to provide details to help them determine the cause. The doctor may ask the following questions:

- What does the chest pain feel like (for example sharp, tight, or squeezing)?
- What causes the chest pain to come on (for example, eating, stress, walking, etc.)?
- What causes the chest pain to go away (for example, resting, taking a deep breath, etc.)?
- Do you have any other symptoms with your chest pain (for example shortness of breath, sweating, or nausea)?

You may also want to ask the doctor if they think that further tests for your heart are required. This may include:

- Electrocardiogram (also called EKG or ECG) – it takes a “snapshot” of your heart’s electrical pattern
- 24-hour Holter monitor – it’s a device that you wear that keeps track of your heart’s electrical pattern for 24 hours
- Chest x-ray – it takes a picture of your lungs and heart
- Stress test – this test evaluates how your heart responds to stress in a monitored environment. There are several types of stress test that your doctor may order. This may involve monitoring your heart while you run on a treadmill or after injection of a medication. Sometimes, stress tests involving physical exercise can worsen symptoms for long COVID patients (especially if they suffer from post-exertional malaise). If you are concerned about this, ask your doctor about the other test options.

Chest pain and long COVID

Sometimes patients with long COVID have chest pain that persists but cannot be explained by the usual tests. Although we may not know what is causing this chest pain, this doesn't mean that the pain is not real.

Chest pain can sometimes be a symptom that accompanies postural orthostatic tachycardia syndrome (POTS), which is experienced by some long COVID patients. Click [here](#) to learn more about POTS.

Often long COVID patients have a type of chest pain that flares up when some of their other symptoms (such as fatigue, brain fog, and palpitations) also flare up. Like with these other symptoms, applying a pacing strategy is often helpful (click [here](#) to see the Pacing section of *MyGuide*).

Where to next?

- Learn more about [Postural Orthostatic Tachycardia Syndrome \(POTS\)](#) and [Pacing](#)

