



INFORMATION FOR PATIENTS UNDERGOING STRESS TEST

Azienda Sanitaria Universitaria Giuliano Isontina

A stress test is indicated for the diagnosis and treatment of the following pathologies:

- Chronic ischemic heart disease – angina/exertional ischemia
- Recent coronary syndrome
- Left ventricular dysfunction – heart failure
- Valvulopathy

Before undergoing the test, you will have an interview with a cardiologist who will explain how to carry out the test and will ascertain that there are no conditions for which the test must be postponed or suspended.

The test is necessary for the following purposes:

- define the nature of your ailments
- establish the efficacy of therapy
- ascertain fitness to practice sport
- ascertain the state of the cardiovascular system
- ascertain the cardiovascular fitness for work

Useful information for the test:

suitable clothing, closed footwear, abstain from smoking for at least 3 hours before the test, usual breakfast up to 3 hours before the test, abstention from taking medicines or other substances or energizing drinks (tea-coffee) and alcohol. Take all the usual therapy unless otherwise indicated.

The test will be carried out with the use of a cycle ergometer (sometimes a treadmill if available) which will allow for a progressive increase in effort. This effort will be increased gradually until certain symptoms appear, such as fatigue, breathlessness, leg or chest pain, or until your doctor decides it is appropriate to stop. During the test the heart rate, blood pressure, electrocardiogram and the percentage of oxygen present in the blood will be kept under control. Thanks to this, the test is considered safe, although rare complications such as the appearance of atrial or ventricular arrhythmias are possible.

You will be informed that you must promptly warn if chest pain, dizziness, weakness, general malaise appear, as these signs may indicate a possible cardiovascular problem.

Foreseeable results of not performing the test are:

- an incomplete knowledge of the disease;
- a poor formulation of the final diagnosis;
- the continuation of the therapy in empirical terms or the impossibility of establishing a correct therapy.

Possible risks of this procedure

The possible occurrence of supraventricular or ventricular arrhythmias (sometimes life-threatening: 1 case out of 5,000), acute heart failure or myocardial infarction. Death from these complications is a very rare event (1 case out of 10,000).

The necessary equipment and trained personnel will be readily available in such situations.



CARDIOLOGY DEPARTMENT'S CLINICS

Responsible Prof. G. Sinagra

CONTACTS

Secretariat 040 399 4865 – Fax 40 399 4878

Clinics Responsible: Dr. I. Tavcar

Secretariat 040 399 4865- Fax 040 399 4878

Drafted by ASUGI's Communication, External Relations, Press Office,
URP on the basis of texts provided by

CARDIOLOGY DEPARTMENT

Director: prof. Gianfranco Sinagra

Revision 02 June 2022