

What is unstable angina?

Unstable angina is a type of chest pain, pressure, or tightness (angina is the medical term for this) that is unpredictable because it is not triggered by anything specific, such as exertion or stress, which is the case with stable angina. Unstable angina is considered a more serious condition because it carries a higher risk of dying or having a heart attack. Compared with people with stable angina, unstable angina patients sometimes experience chest pain more frequently, more severely, and while resting. Chest pain that does not go away within 15 minutes or chest pain that is getting progressively worse may signal unstable angina.

What is a mild heart attack?

During a “typical” heart attack, a blood clot lodges in one of the small arteries of the heart, blocking blood flow to the heart. This produces an easily identifiable pattern on ECG or electrocardiogram testing, called ST-segment elevation. However, some people do not have complete blockage in the artery; instead the clot interrupts the blood flow only intermittently. This type of “mild heart attack” does not produce the typical heart attack pattern on the ECG. The pattern produced is usually called non-ST-segment elevation. The medical term for this type of mild heart attack is *non-ST-segment myocardial infarction* or NSTEMI (pronounced “en-stemee”).

What is the difference between unstable angina and a mild heart attack?

Whether you are diagnosed with unstable angina or a mild heart attack (NSTEMI) depends on your ECG pattern and the results of blood tests. The two are similar in terms of symptoms and causes; however, during a mild heart attack, the blood flow to the heart will be reduced so much that the heart muscle becomes damaged. When the heart muscle is damaged, proteins from the damaged heart muscle are released into the blood; these proteins can be detected in a simple [blood test](#). The most common proteins measured are the *troponins* and *creatine kinase-MB* (or CK-MB for short). If you test positive for these proteins, you will be diagnosed with NSTEMI or a “mild heart attack.” If your blood tests are negative (that is, no proteins are present) then you will likely be diagnosed with unstable angina.

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