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—Delilah Teague, who was diagnosed with broken heart syndrome after her angiogram showed no blockages

# Mending a Broken Heart

As women like Delilah Teague are discovering, there really is such a thing as a broken heart. Happily, there's a way to help it heal

The surgery was to remove her gall bladder. So why did 59-year-old Delilah Teague appear to be having a heart attack when she got to the recovery room?

The monitor she was hooked up to indicated heart attack. So did her electrocardiogram. She'd even had to receive CPR.

And when Teague woke up, she was not in a hospital bed but in a helicopter, being rushed from Saint Luke's East-Lee's Summit to Saint Luke's Hospital for an emergency angiogram.

Kevin Bybee, M.D., a cardiologist with the Saint Luke's Mid America Heart Institute, came to Teague's room shortly after the angiogram was performed by his colleague to give her the results.

“He told me there was no blockage,” Teague said. “I was so thankful for that.”

She hadn't had a heart attack after all. But what, then? “Delilah Teague had broken heart syndrome,” Dr. Bybee said.

## Stress that reaches the breaking point

Dr. Bybee is one of the first cardiologists in the country to study broken heart syndrome, a condition that Japanese doctors first described in 1991. American doctors first put it on the pages of the medical journals in 2004.

Teague, whose gall bladder surgery was in June 2006, was a classic example of those who suffer from it.

“Ninety-five percent of the patients who experience it are postmenopausal women,” Dr. Bybee said. “The symptoms mimic classic symptoms of heart attack—chest pain, shortness of breath. Their EKG (electrocardiogram) will suggest heart

attack. But an angiogram will show no blockage in the arteries.” X-rays of the heart will, however, reveal something else.

“When Dr. Bybee showed me the picture of my heart, it looked like a butternut squash,” Teague said. “He told me my heart was ballooning.”

Her heart was still willing but not quite as able. It was pumping, but not as strongly as it should have been.

But why?

“Acute emotional stress can bring it on,” explained Dr. Bybee. “And half the time, it's precipitated by an acute medical illness. The fact that this occurred right after Mrs. Teague's surgery makes me think she must have had a high level of anxiety going into it. It can be a combination of factors.”

For Teague, it appears to have been just that.

She confessed that she had been extremely nervous about the surgery. In addition, she was dealing with family issues that, as she said, she had taken to heart.

“When Dr. Bybee told me I had a broken heart, all I could say was, ‘Wow,’” Teague recalled. “But then I wasn't afraid—just curious.”

## Halting the adrenaline rush

The good thing about broken hearts is they mend.

“You do eventually recover on your own,” Dr. Bybee said. “But beta blockers help the process and also help prevent recurrence.”

Beta blockers inhibit the effect of adrenaline on the heart, and doctors believe adrenaline is the culprit in broken heart syndrome. Hormonally, women may be programmed to protect



**Heart and soul** Acute medical and emotional stress can lead to the kind of broken heart syndrome that Delilah Teague experienced.

their hearts from the adrenaline—a protection that's lost as a result of menopause.

The statistics bear this out.

“Broken heart syndrome accounts for about 2 percent of all patients thought to be having a heart attack,” Dr. Bybee said. “That's about one in 50. But among postmenopausal women thought to be having a heart attack, the ratio is about one in 20, or 6 percent.”

## Meditating on prevention

For Teague, some of the impetus for healing her broken heart was to get back to the everyday small pleasures.

“I wanted to get back to my yard work, gardening, and cooking,” she said. “It took a while, but things gradually started to improve. And Dr. Bybee told me my heart was strong and that I would be OK.”

The more doctors study broken heart syndrome, Dr. Bybee said, the more they believe it to be a metabolic injury caused by adrenaline. Adrenaline upsets the normal workings of the heart.

“It suggests there's a brain-heart relationship beyond what many people may have thought,” Dr. Bybee said. “If you look at Eastern practices, such as meditation and deep breathing, they're lowering the adrenaline level.”

Emotionally, the situations that might bring on broken heart syndrome cover a broad spectrum. They range from the death of a loved one to a severe case of stage fright.

Thus far, there's no clinical way to tell if someone is at risk of broken heart syndrome or more prone to it. But chances are, patients like Teague won't have to experience another heartbreaker. The odds of broken heart syndrome happening more than once are very low.

Even so, Teague has the right idea with the adrenaline tamer she's practicing.

“I'm learning to shrug things off,” she said. “I won't allow this to happen again. I call my heart ‘my sweetheart’ and tell her we're going to be all right.” ✦



**The first to know** Kevin Bybee, M.D., a cardiologist with Saint Luke's Mid America Heart Institute, is one of the first doctors in America to recognize broken heart syndrome.