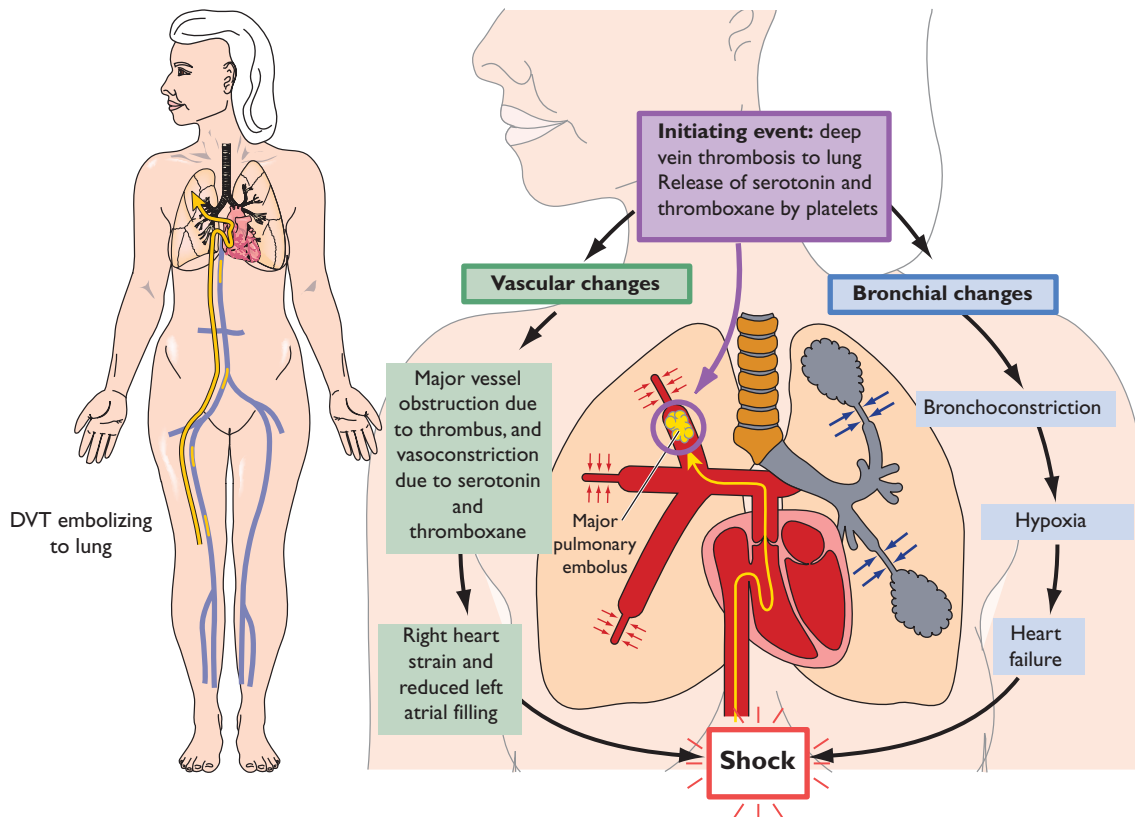


Figure 9.2 The pathogenesis of shock in pulmonary embolism



and instigate urgent treatment. Acute coronary syndrome takes one of three forms:

- crescendo angina
- unstable angina
- myocardial infarction.

Myocardial infarction is diagnosed when two of the following criteria are present:

- prolonged cardiac pain at rest and unresponsive to GTN
- characteristic ECG changes
- detectable T or I troponin or creatine kinase MB isoenzyme in the blood 12 hours after the onset of symptoms.

Because urgent therapy is crucial, it is not sensible to wait 12 hours for the rise in serum markers of myocyte damage and so, on admission, acute coronary syndromes are divided into those with and without ST segment

Figure 9.3 Risk of death from admission to hospital to 6 months after discharge (Redrawn from Fox et al (2006), *BMJ* 333, 1091. With permission from BMJ Publishing Ltd)

