

Patient information from BMJ

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Stable angina: what are the treatment options?

If you have stable angina you get pain and discomfort when your heart muscle needs to work harder than usual (for example, when you're physically active). This is because the blood vessels leading to your heart muscle are narrowed, so your heart doesn't get enough oxygen. To read more about the causes and symptoms of stable angina, see the leaflet *Stable angina: what is it?*

You might worry about how angina will affect your life and what will happen to you. But there are good treatments that can control angina attacks and help you stay active.

You might hear your doctor call stable angina "stable ischaemic heart disease".

You'll probably need to take a few types of medicine. The aims of treatment are to:

- prevent complications of heart disease, such as heart attacks
- relieve discomfort and pain caused by angina
- improve your quality of life.

There are also things you can do to improve your chances of staying healthy.

Medicine for angina pain

Glyceryl trinitrate (GTN) is a tablet you place under your tongue. It can make the pain of an angina attack go away quickly, within a few minutes. It widens your blood vessels, letting more blood flow through so your heart gets the oxygen it needs.

You can carry GTN with you so it's ready to take if you have an angina attack. You can also use it just before you do something that can bring on an attack, such as going for a walk.

GTN also widens the blood vessels in your brain. This can cause a throbbing headache that starts soon after you take it.

If you still have chest discomfort or pain after taking three doses of GTN over 15 minutes, get medical help straight away. You could be having a heart attack.

Things you can do to help yourself

If you have angina there are many things you can do to reduce your chance of having a heart attack or stroke. Doing these things may also mean you have fewer angina attacks.

- If you smoke, get help to stop. Your doctor can advise you on ways to stop smoking. Smoking makes your arteries more narrow.
- Keep to a healthy weight. This might involve changing your diet to include more fresh fruit and vegetables and fewer processed, fatty, or sugary foods.
- Take regular gentle exercise - but discuss this with your doctor first.
- Try to limit how much alcohol you drink.
- Try to recognise and avoid things that cause you stress.

To learn more, see the leaflet *Stable angina: what you can do to help yourself*.

Medicines to prevent a heart attack

If you have angina your chance of having a heart attack or stroke is greater than normal. Your doctor might suggest treatments to reduce your risk. He or she will probably suggest medicines to:

- stop your blood from clotting too easily
- lower your cholesterol, and
- control your blood pressure.

Medicines to help prevent blood clots

Your doctor might suggest that you take a low dose of aspirin to reduce your chance of having a heart attack. Aspirin makes your blood 'thinner', so you are less likely to get a blood clot that could block your arteries.

But aspirin can cause ulcers or bleeding in the stomach for some people. If aspirin isn't suitable for you (for example, if you've had a stomach ulcer before) you might be able to take a similar drug, called clopidogrel.

Medicines to lower cholesterol

Drugs called statins can lower your cholesterol, which can help protect you from having a heart attack or stroke. Taking statins can lead to side effects in some people, including liver damage, muscle pain and muscle damage, and kidney damage. You may need blood tests to check that your liver and kidneys are working properly.

Medicines to lower blood pressure

Drugs called ACE inhibitors can help protect you from a heart attack or stroke by lowering your blood pressure. They can cause side effects, including a dry cough. If you can't take an ACE inhibitor, your doctor may suggest a similar drug called an angiotensin 2 receptor blocker (ARB).

Medicines to prevent angina attacks

If you are finding your angina troublesome, your doctor may suggest you take medicine to reduce the number of attacks you get. If your angina troubles you a lot, your doctor might suggest you take more than one of these medicines.

Beta-blockers are the first type of medicine most doctors recommend for controlling angina. Beta-blockers also reduce your chances of having a heart attack or stroke.

They can cause side effects, including feeling tired and dizzy when you stand up, and cold hands and feet. If you're a man and have erection problems, beta-blockers can sometimes make them worse. Beta-blockers are not usually recommended for people who have asthma, as they can worsen the symptoms.

If you can't take a beta-blocker, or if your doctor thinks you need extra medication, he or she might suggest you take a **calcium channel blocker**. These drugs can cut your chances of having a heart attack or stroke. Possible side effects include flushing, swollen ankles, dizziness when standing up quickly, and low blood pressure.

Long-acting nitrates are drugs that help widen your blood vessels. They come as tablets or as ointment you rub on your skin. But your body can get used to long-acting nitrates, which means they stop working so well. To avoid this you take nitrates only at certain times.

In some people long-acting **nitrates** may cause headaches, dizziness and fainting, and red or flushed skin. These medicines are usually offered to people who can't take other medicines that prevent angina attacks, or as additional medicines for people with more severe symptoms.

Other treatments

If you can't take the usual angina treatments there are other, newer medicines that you might be able to try. But we don't know as much about how well these newer drugs work or about their possible side effects.

Surgical procedures, such as coronary angioplasty or a coronary artery bypass, are usually only recommended for people with stable angina whose symptoms are very severe, people whose angina symptoms are not controlled by medicines, and people at high risk of having a heart attack or stroke.

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