Pulmonary Arterial Hypertension (PAH) Program
The PAH Program coordinates the assessment, care, and treatment of patients with suspected or diagnosed pulmonary arterial hypertension (PAH).

What is PAH?
PAH happens when the pressure in the lungs’ arterial blood vessels rises above normal. The high pressure means that the right side of the heart has to work harder to pump blood through the lungs. This may result in symptoms like:

› shortness of breath
› tiredness
› dizziness and/or fainting
› swelling of the legs and/or abdomen

PAH is a condition which progresses at different rates in different people.

This pamphlet is just a guide. If you have questions, please talk to your health care provider. We are here to help you.
What causes PAH?
In many cases, the cause of PAH is unknown. PAH may run in the family. It may also be related to heart defects present at birth, diseases such as scleroderma or lupus, advanced liver disease, or HIV/AIDS. The treatment depends on the cause and severity of PAH and how the person responds to treatment.

Why have I been referred to the Pulmonary Arterial Hypertension (PAH) Program?
Staff of the PAH Program diagnose and treat pulmonary arterial hypertension. The doctor who sent you to the PAH Clinic suspects that one or more of your symptoms or tests suggests that you may have PAH. We will find out whether or not you have PAH, and decide how best to help you.

How will the PAH Program help me?
When you visit the Clinic, you will meet with the PAH nurse coordinator and one of the PAH doctors. Lab tests that you had done at the QEII or elsewhere will be reviewed. After talking with the team, you may need more tests to find out whether or not you have PAH, possible causes of your PAH, and how severe it is.
What tests will be done?
The following tests may be needed to find out whether you have PAH and what may be causing it. The results will help us decide what treatments may be best for you.

- **Blood work** – Screening for possible causes of PAH is done through blood testing.

- **Electrocardiogram (ECG)** – A painless test which records the electrical impulses in your heart.

- **Echocardiogram (‘Echo’)** – This ultrasound of the heart shows its size, shape, and movement. It also shows the flow of blood through the heart.

- **6-Minute Walk Test** – You will be asked to walk up and down a measured hallway at your own pace while your symptoms and oxygen level are monitored. The distance you are able to walk and the changes in your oxygen level tell us how much you are limited by PAH, and if your treatment is working.

- **Pulmonary Function Tests (PFTs)** – These tests tell us how well your lungs are working.

- **CT Angiogram** – This special “CAT scan” looks at the lungs’ blood vessels and tissue. It tells us if there are clots in the vessels and if the lung tissue has been scarred. An intravenous (IV) and an injection of dye are needed.
Ventilation/Perfusion Scan (V/Q) – This measures ventilation (airflow) and perfusion (blood flow) in the lungs to find chronic (long-lasting) clots in the blood vessels. An IV and an injection of dye are needed.

Additional tests
These tests may or may not be needed for further information.

Right Heart Catheterization – The pressure in the lungs and heart are measured. An IV in your neck or groin is needed. You may be asked to inhale (breathe in) oxygen and nitric oxide (a gas with no taste or smell).

Sleep study – This test checks for sleep apnea (stopping breathing for short periods, many times while sleeping). It can be done in your home or in the sleep laboratory in the hospital.

Exercise Echocardiogram – An ultrasound of your heart is done during a 45-60 minute exercise test.

What are your questions?
Please ask. We are here to help you.
How is PAH treated?
Treatment of PAH depends on the severity, and in some cases, the cause of the disease. After the tests are completed, you will be asked to return to the PAH Clinic to talk about what medications or therapies are best for you. Medical treatment with pills or IV medications may improve your condition. Many patients feel much better and are able to do more once they start treatment.

Surgery options
Lung transplantation may be considered when medical treatment is no longer helpful. The PAH team may refer you for lung transplantation assessment. Not all patients are candidates for lung transplantation.
If your PAH is caused by chronic blood clots in the lungs (CTEPH), you may be a candidate for another specialized surgery (pulmonary endarterectomy) that is done in Ontario.

How often do I have to visit the Clinic?
Once you start treatment, you will be evaluated regularly in the Clinic. How often you are seen depends on your condition and your response to therapy.
For more info:
Pulmonary Arterial Hypertension (PAH) Program
Room 2290 Halifax Infirmary, QEII
1796 Summer Street, Halifax, NS  B3H 3A7
Phone: 902-473-3841
Fax: 902-425-1698

Pulmonary Hypertension Association of Canada
› www.phacanada.ca

Notes:
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
Pulmonary Arterial Hypertension (PAH) Program

Medical Director: Dr. Simon Jackson (Cardiologist)

Research Director: Dr. Paul Hernandez (Respirologist)
Dr. Colm McParland (Respirologist)

Research Coordinator: Scott Fulton
PAH Nurse Coordinator: Pauline Stein

Looking for more health information? Find this pamphlet and all our patient resources here: http://library.nshealth.ca/PatientGuides
Contact your local public library for books, videos, magazines, and other resources.
For more information, go to http://library.novascotia.ca
Connect with a registered nurse in Nova Scotia any time: call 811 or visit https://811.novascotia.ca
Learn about other programs and services in your community: call 211 or visit http://ns.211.ca

Nova Scotia Health Authority promotes a smoke-free, vape-free, and scent-free environment.
Please do not use perfumed products. Thank you!
www.nshealth.ca

Prepared by: Pulmonary Arterial Hypertension Program
Designed by: NSHA Library Services

The information in this brochure is for informational and educational purposes only. The information is not intended to be and does not constitute health care or medical advice. If you have any questions, please ask your health care provider.

WG85-1103 © July 2018 Nova Scotia Health Authority
The information in this pamphlet is to be updated every 3 years or as needed.