

Dilated Cardiomyopathy (DCM)

The Jordan Boyd Inherited Heart Disease Clinic

Notes:

This pamphlet is for educational purposes only. It is not intended to replace the advice or professional judgment of a health care provider. The information may not apply to all situations. If you have any questions, please ask your health care provider.

Find all patient education resources here:
www.nshealth.ca/patient-education-resources

Connect with a registered nurse in Nova Scotia any time:
Call 811 or visit: <https://811.novascotia.ca>

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Dilated Cardiomyopathy (DCM)

How does the heart work?

- The heart is a hollow organ made of muscle. It has 4 chambers: 2 at the top (**atria**) and 2 at the bottom (**ventricles**).
- Blood flows from the body into the top chambers. The blood is pumped to the bottom chambers, and is then pumped back out to the body.
- Electric signals that pass through the heart muscle control the pumping of the chambers. This electrical activity is called the **heart rhythm**.

What is dilated cardiomyopathy (DCM)?

- DCM weakens the heart muscle. This makes it harder for your heart to pump blood out to your body. This causes the bottom chambers to dilate (stretch).
- A weak heart can cause fluid to build up in your lungs (causing trouble breathing), ankles, or belly (causing swelling).
- DCM can also change your heart's electrical activity. This can cause a dangerous, fast heart rhythm.

For more information about DCM:

- **Heart and Stroke Foundation of Canada**
 - › www.heartandstroke.ca/heart-disease/conditions/cardiomyopathy
- **HealthLink BC**
 - › www.healthlinkbc.ca/health-topics/dilated-cardiomyopathy
- **Cardiomyopathy UK**
 - › www.cardiomyopathy.org/dilated-cardiomyopathy

What are your questions?

Please ask a member of your health care team. We are here to help you.

Genetic testing and family screening

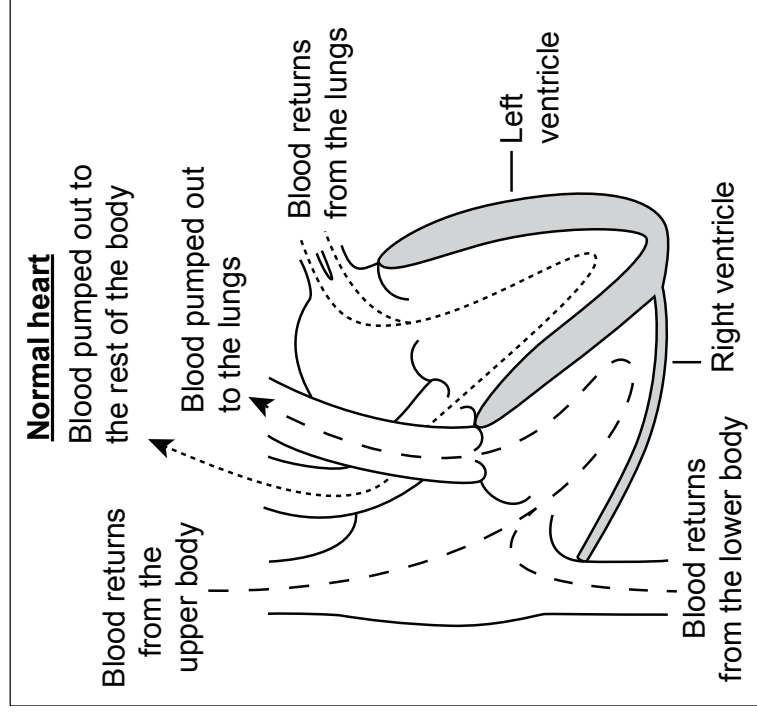
- If your cardiologist thinks changes in your genes caused your DCM, they may ask if you would like to talk with a genetic counsellor about genetic testing.
- Your cardiologist may also want to ask other members of your family to test for DCM. They may ask you to give letters with information about DCM to your family members.

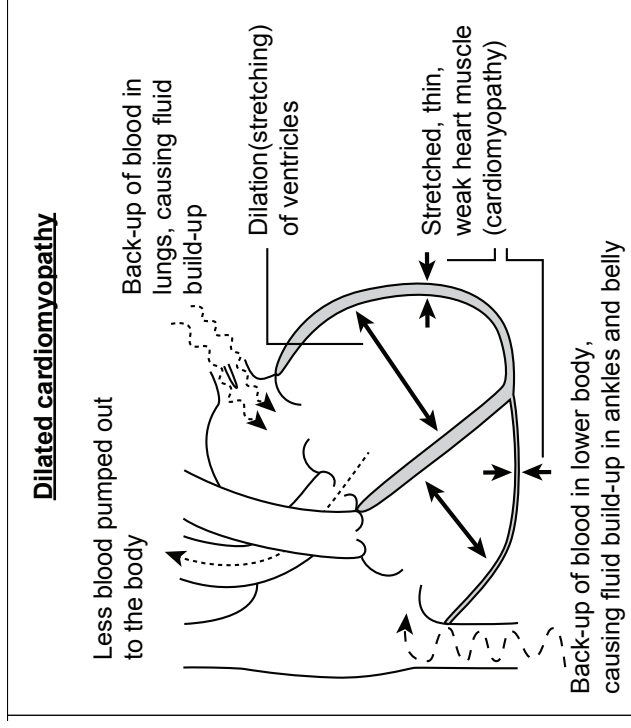
How is DCM treated?

- There is no cure for DCM, but there are treatments that can control a fast heart rhythm and help with your symptoms.
- Treatments may include medications to:
 - › Help control a fast heart rhythm
 - › Help lower fluid buildup
 - › Improve how well your heart is pumps
- Other treatments include:
 - › A pacemaker called an **internal cardioverter defibrillator** (ICD). The ICD identifies fast heart rhythms and slows your heart rhythm down to a safer speed
 - › A heart transplant. This is rare.

What causes DCM?

- Some causes of DCM are:
 - › A virus
 - › An autoimmune disease (where your immune system attacks your body)
 - › Too much alcohol
 - › Drug use (like cocaine)
 - › Pregnancy
 - › Some types of medication (like chemotherapy drugs)





- DCM can also be caused by changes in your genes. These changes can be hereditary (passed from parents to their children).

What are the symptoms of DCM?

- Symptoms may include:
 - › Trouble breathing
 - › Swollen ankles and belly
 - › Tiredness
 - › Dizziness
 - › Lightheadedness
 - › Palpitations (feeling like your heart is jumping, racing, or fluttering)
 - › Blackouts (passing out or not being able to remember a certain amount of time)

How is DCM diagnosed?

- Health care providers use different tests to diagnose DCM. You may have some of these tests:
 - › **Electrocardiogram (ECG/EKG):** A recording of your heart rhythm for 10 to 20 seconds.
 - › **Holter monitor:** A recording of your heart rhythm for 24 hours (1 day).
 - › **Echocardiogram (Echo):** An ultrasound that measures the size of your heart chambers and how well your heart is pumping.
 - › **Cardiac MRI:** A scan using magnets and radio waves. It measures the size of your heart chambers, how well your heart pumps, and shows any fat and scar tissue in the heart muscle.
- **Your cardiologist (heart doctor) may want you to have other tests when they are diagnosing you.** They will talk with you about this, if needed.