

So just
what is
PH?

Pulmonary hypertension
– PH for short – is a serious condition
that causes **high blood pressure** in the
blood vessels connecting the **heart**
and **lungs** (the pulmonary arteries).



In a **healthy cardiovascular system**, the right-side to the heart pumps blood into the lungs to pick up oxygen and this oxygen-rich blood is then pumped around the body by the left-side of the heart.

When a person develops PH,

the walls of the pulmonary arteries become stiff and thickened, or blocked by blood clots. This makes it difficult for them to expand; and trying to pump blood through these tightened, narrowed, scarred or blocked arteries puts increasing strain on the right side of the heart as it tries to do its job. The essential task of pumping blood into the lungs to pick up oxygen which can then be circulated to every cell in the body becomes much harder.

PH affects people's abilities to carry out basic tasks and get around. People with this condition often look well at rest and it's only through a simple activity such as climbing the stairs that they may experience symptoms:

Shortness
of breath
with
exercise



Feeling
tired or
dizzy



Swelling
in the
ankles,
arms or
stomach
area



Chest
pain



Living with the chronic condition

can also have a significant impact on emotional wellbeing and self-esteem as people deal with the frustrations caused by PH and their worries about the future.

Pulmonary hypertension is rare.

Around **7,000 people** are diagnosed with PH in the UK. It can affect anyone, regardless of age or ethnic background. It is more common in women than men.

How is
PH?
treated?

PH responds to a range of highly advanced treatments which can relax the arteries to help increase blood flow and reduce pressure, improve symptoms, slow disease progression and reverse damage to the heart and lungs.



PH can be **associated with another medical condition** such as congenital heart disease, connective tissue disease, HIV infection or sickle cell anaemia.

A small number of people with PH develop it **without having another medical condition** – this is known as **idiopathic pulmonary arterial hypertension (IPAH)**.



These treatments, developed over the last 15 years, don't cure PH, but have improved the quality of life for people with the condition and increased life expectancy from just two to three years to six to seven years on average, with many living much longer.

A few people with pulmonary arterial hypertension require lung and/or heart transplants if they don't respond to medical treatment.

The type of PH caused by a build-up of blood clots - called chronic thromboembolic pulmonary hypertension or CTEPH - **may be cured by undergoing a major operation** to remove the clots from the arteries.

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