

認識心臟衰竭

Understanding Heart Failure



心臟衰竭是什麼？

What is Heart Failure?

心臟衰竭是一種臨床綜合症，通常由結構性或功能性的心臟疾病引起。

Heart failure is a clinical syndrome usually caused by structural or functional heart diseases.

心臟衰竭的病徵包括：

Heart failure may present with:

- 胸悶氣喘
Chest tightness and shortness of breath (dyspnea)
- 疲倦頭暈
Fatigue and lightheadedness
- 體重突然增加
(如一星期增加五磅)
Sudden weight gain (e.g., an increase of about 5 pounds within a week)
- 心跳加速
Palpitations or a rapid heartbeat
- 咳嗽
Cough
- 食慾減退
Loss of appetite
- 認知障礙與迷失方向
Cognitive impairment and disorientation
- 運動量下降
Reduced Exercise Tolerance
- 出現積水或腫脹
Fluid accumulation or swelling (edema)

成因

Causes

若符合以下心臟衰竭的風險因素且開始出現任何病徵，就可能是身體發出警號，應該盡快求診。

If you have any of the following risk factors for heart failure and begin to develop symptoms, this may be a warning sign — seek medical attention promptly.

- 三高
(高血壓、高血糖、高血脂)
Hypertension, hyperlipidemia, and diabetes mellitus (the "three highs")
- 冠心病
Coronary artery disease
- 心律不正
Cardiac arrhythmias
- 先天性心臟病
Congenital heart disease
- 心臟瓣膜毛病
Valvular heart disease
- 肺部疾病
Pulmonary disease
- 濫藥、酗酒、吸煙
Substance misuse, heavy alcohol use, and smoking
- 睡眠窒息症
Sleep Apnea
- 其他：如嚴重貧血
Other causes: for example, severe anemia

預防心臟衰竭貼士

Prevention Tips



適量運動
Exercise in moderation



控制血糖
Control blood sugar



控制血壓及膽固醇
Control blood pressure and cholesterol



嚴控鈉及水份攝取量
Strictly limit sodium and fluid intake



戒煙酒
Quit smoking and alcohol



保持心境開朗
Maintain a positive mindset

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診斷方法

Diagnostic Methods



血液測試：測試N端腦利納肽前體（NT-ProBNP）的濃度並根據年齡，分析左心房的泵血能力。
Blood tests: Measure N-terminal pro-B-type natriuretic peptide (NT-proBNP) levels and, with age-specific interpretation, assess left ventricular filling pressures and cardiac function.



心電圖：檢查是否有不正常的心跳、不充足的氧及血液輸送，判斷心臟是否肥大或負荷過重。
Electrocardiogram (ECG): Evaluate for abnormal heart rhythms, signs of ischemia or inadequate oxygen/blood supply, and evidence of cardiac hypertrophy or electrical load.



心臟超聲波檢查：檢查心瓣和心室的狀況及心臟跳動的情形。
Echocardiography: Assess valvular and ventricular structure, contractile function, chamber sizes, and wall motion.



胸部X光：檢查心臟大小及形狀的改變。
Chest X-ray: Evaluate heart size and contour for cardiomegaly or other structural changes, and assess for pulmonary congestion.



心臟電腦掃描：看冠狀動脈血管的狹窄或阻塞情況，用來排除嚴重冠心病。
Cardiac CT scan: Checks the degree of narrowing or blockage in the coronary arteries to help rule out severe coronary heart disease.



心臟磁力共振：主要看心臟本身的功能與結構，評估心臟衰竭相關的改變。
Cardiac MRI: Mainly evaluates the heart's structure and function to assess changes related to heart failure.



睡眠檢查：排除嚴重睡眠窒息症。
Sleep study: To help rule out severe sleep apnea.

治療方案

Treatment Options

藥物治療：

Pharmacological therapy:

- 血管緊張素轉化酶
Angiotensin-converting enzyme (ACE) inhibitors
- 血管擴張素受體阻滯劑
Angiotensin II receptor blockers (ARBs)
- 腦啡肽酶抑制配合血管收縮素受體抑制劑
Angiotensin receptor-neprilysin inhibitor (ARNI)
- B受體阻滯劑
Beta-blockers
- 抗鹽皮質激素
Mineralocorticoid receptor antagonists (MRAs)
- 鈉-葡萄糖協同轉運蛋白2抑制劑
Sodium-glucose cotransporter-2 (SGLT2) inhibitors
- 利尿藥
Diuretics
- 地高辛
Digoxin
- 選擇性竇房結If抑制劑
Selective sinus node If current inhibitors (e.g., ivabradine)
- 血管舒張劑
Vasodilators

醫生會視乎患者的病況，以不同的藥物治療患者的心臟衰竭。
Physicians will individualize drug regimens based on the patient's clinical status and underlying etiology.

手術治療：

Surgical and device therapies:

- 冠狀動脈介入治療術（俗稱通波仔）
Percutaneous coronary intervention (PCI)
- 冠狀動脈繞道手術（俗稱搭橋）
Coronary artery bypass grafting (CABG)
- 心瓣修補術
Valve repair or replacement procedures
- 植入式心臟復律除顫器ICD
Implantable cardioverter-defibrillator (ICD)