TRENTON, New Jersey (AP) -- Confirming the wisdom of the poets and philosophers, doctors say the sudden death of a loved one really can cause a broken heart.

In fact, they have dubbed the condition "broken heart syndrome."

In a study published just in time for Valentine's Day -- February 14 -- doctors reported how a tragic or shocking event can stun the heart and produce classic heart attack-like symptoms, including chest pain, shortness of breath and fluid in the lungs.

Unlike a heart attack, the condition is reversible. Patients often are hospitalized but typically recover within days after little more than bedrest and fluids and suffer no permanent damage to their hearts.

In their study, published in Thursday's New England Journal of Medicine, doctors at Johns Hopkins University gave a name to the condition, demonstrated through sophisticated heart tests how it differs from a heart attack, and offered an explanation for what causes it.

For centuries, doctors have known that emotional shocks can trigger heart attacks and sudden deaths. Broken heart syndrome, technically known as stress cardiomyopathy, is a different phenomenon.

The Johns Hopkins doctors documented how a dayslong surge of adrenaline and other stress hormones can cause a decline in the heart's pumping capacity. The researchers theorized that the hormones probably cause tiny heart blood vessels to contract, but other explanations are possible.

Until now, doctors "were trying to explain it away, but the pieces never quite fit," said Dr. Hunter Champion, an assistant professor. "By our ability to recognize it, we've saved people from getting unnecessary (heart) procedures."

Champion and colleagues treated 19 emergency room patients with the syndrome between 1999 and 2003. Many were grieving over the death of a husband, parent or child. Other triggers included a surprise party, car accident, armed robbery, fierce argument, court appearance and fear of public speaking.

MRIs and other tests showed they had not suffered heart attacks.

Other doctors have since told Champion that they have seen the same thing, and researchers in Japan and Minnesota have reported similar cases.

"This is probably something that happens all the time," but most people do not seek
treatment, Champion said.

Dr. Daniel Shindler, director of the echocardiography lab at Robert Wood Johnson Medical School in New Brunswick, New Jersey, said it apparently happened to his wife last week, when she was upset over her sister's death. The wife, who also is a doctor, sensed abnormalities in her heart. Testing showed abnormal rhythms, but she is fine now.

Shindler said the researchers' conclusions make sense, given the well-known link between the brain and heart, and offer the first explanation he has heard for the phenomenon.

Dr. Sidney Smith, former American Heart Association president and director of University of North Carolina's Center for Cardiovascular Science and Medicine, said the study will lead more ER and heart doctors to consider the syndrome when examining patients with chest pain.

"We'll definitely be paying more attention now than before" to patients who are grieving, Shindler said.

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