

**ISCHEMIC HEART DISEASE**

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**Annotation:** *ischemic heart disease is currently a common disease among our population, especially among men with a relatively young age of over 40 years. In this case, it is considered a disease of the heart muscle that occurs as a result of oxygen needs and impaired blood circulation in the crown vessels of the heart. These result in ischemia or necrosis in the myocardial tissue of the heart, resulting in atherosclerosis. When ischemic heart disease develops, the leading Crown vessels are atheroma clerosis, large vascular spasm, in which thrombus formation and, due to the causes, myocardial infarction or acute conductive non-stable stenocardia may occur. The origin and development of ischemic heart disease can be caused by people's age, hereditary predisposition to the disease, diabetes mellitus, hypertension, alcohol withdrawal, smoking, alertness and mental as well as physical exertion.*

**Keywords:** *ischemic heart disease, hypertension, diabetes mellitus, atherosclerosis, spasm, cholesterol, hypodynamics, stenocardia, hypercholesterolemia, hyperglycemia, hyperuricemia, myocardial infarction.*

Ischemic heart disease is a common disease of the cardiovascular system; accompanied by myocardial ischemia and coronary circulation disorders. Ischemic heart disease, mainly due to atherosclerosis of the coronary (Crown) vascular arteries, there is a lack of blood circulation in the heart muscles and, therefore, the heart does not flow into the blood. Ischemic heart disease includes stenocardia (primary, mucilage, non-acute), myocardial infarction, post-infarction atherosclerosis, arrhythmic type, and heart failure. Ischemic heart disease. regular progression is severe heart disease. As you get older, the incidence of disease increases. The most common cause of narrowing of blood vessels is the appearance of atherosclerotic plaques, which are formed due to the accumulation of fat on the walls of blood vessels. Therefore, the risk group includes people who have many conditions for the accumulation of cholesterol in blood vessels: smokers, alcohol abusers, people with diabetes and obesity, those with a genetic predisposition to hyperlipidemia.

**SYMPTOMS OF HEART ISCHEMIA**

Shortness of breath. This condition can occur both when walking fast or climbing stairs, and during calm movements. Arrhythmia. Interruptions in the work of the heart,

rapid heartbeat. Hypertension. Sharp jumps and rises in blood pressure. Pressure stenocardia. Pressure pains located behind the chest, the transition to the neck and left shoulder. Myocardial infarction. It is similar to stenocardial snoring, but is not controlled by drugs. The heart is accompanied by intense pain in the part. Indicates the development of coronary heart disease. By itself, it is considered life-threatening due to a violation of the heart muscle. Ischemia can manifest itself even in people who do not have specific factors for the development of cardiovascular diseases. Therefore, it is important to know about the symptoms of coronary artery disease. The sooner a circulatory disorder is detected, the higher the chances of successful treatment. At the same time, the development of ischemia of the heart often passes slowly and is practically symptom-free in the early stages (few people pay attention to pain in the heart area and slight shortness of breath). In order to diagnose the disease at the initial stage, it is necessary to regularly undergo a preventive examination by a cardiologist and therapist.

#### **THE DISEASE CAN TAKE VARIOUS FORMS:**

Asymptomatic. The patient often does not pay attention to the mild discomfort he experiences after experiencing stress or engaging in heavy physical labor. Over time, it acquires a more pronounced character, develops and develops. Stressful angina is a chronic disease. Unstable angina-attacks that increase frequency and strength. It can signal a recent heart attack. Arrhythmic form (atrial fibrillation). Acute condition that has become chronic, cardiac arrhythmias. Heart attack. An acute type of coronary artery disease occurs as a result of the death of part of the heart muscle, detachment from a blood vessel and its further clogging. Sudden heart death. This occurs due to a sharp decrease in the intensity of blood flow to the heart. Despite the potentially fatal consequences, the diagnosis of coronary artery disease with timely and systemic treatment has good forecasts for the restoration of the quality of life.

#### **DIAGNOSIS OF CORONARY HEART DISEASE**

There are symptoms that are easy to diagnose ischemia: angina pectoris, arrhythmia, heaviness on the left behind the sternum, shortness of breath. This is a serious reason to clarify the diagnosis. In our clinic, patients receive the latest methods of treatment and diagnosis of coronary artery disease in Moscow. We use ultrasound of veins and arteries. This is a painless procedure that allows the specialist to determine the location of the affected vessels, the intensity of blood flow. The results of diagnostics reveal individual characteristics for the appointment of an effective method of assistance. An additional method of research is coronary angiography (performed under local anesthesia). An electrocardiogram (ECG) can help identify stenocardia (and distinguish it from other similar pains in the heart), arrhythmia, and myocardial infarction. In order for the result to be complete, the patient can be prescribed an ECG both at rest, with a load, and under the supervision of Holter (monitoring the electrical activity of the heart during the day).

An echocardiograph or ultrasound of the heart allows you to visually assess the condition of the heart muscle, the functioning of the valves and see the places of a heart

attack. The most informative and modern diagnostic method for coronary artery disease is considered coronary angiography. In this case, with the help of a probe, contrast media is injected into the vessels of the heart and an X-ray examination is performed. Thus, information is obtained about the narrowing of the vessels, the degree of narrowing and the location of cholesterol plaques. The entire set of diagnostic methods is designed to determine whether the patient needs surgical intervention to improve his condition, prescribe medication and prescribe therapy. Unfortunately, heart ischemia is not yet fully cured. However, treatment provides an opportunity to significantly improve the patient's health.

#### **TREATMENT OF HEART ISCHEMIA: BASIC APPROACHES AND METHODS**

Currently, there are several ways to treat heart ischemia. Usually, the doctor, based on the diagnosis, prescribes not one, but a set of therapeutic measures. The main approaches in the treatment of heart ischemia: restriction of physical activity in heart ischemia when shortness of breath, chest pain, in a word, stenocardia, cardiac arrhythmias and the first signs of a heart attack are detected, the patient is advised to refrain from exercise (active and intense sports). When climbing stairs, and the speed of walking should be kept at a moderate level, and the general condition should be observed. At the same time, when the severity of diseases of the heart ischemia is small, non-intensive loads help to strengthen the vessels of physical activity: swimming, cycling, walking peacefully

#### **PREVENTION OF HEART DISEASE**

Everyone knows that any disease is easier to prevent than to cure it. Therefore, preventive measures should not be neglected to maintain the health of blood vessels and vessels. First of all, a person should eliminate certain risk factors for coronary heart disease: quitting smoking, reducing alcohol consumption to a minimum, avoiding fatty foods and foods high in cholesterol. It is also necessary to pay attention to physical activity (especially cardio training — walking, cycling, dancing, swimming). This will help not only reduce weight, but also strengthen the walls of blood vessels. Every six months, you need to undergo a blood test to control your sugar and cholesterol levels.

#### **MYOCARDIAL INFARCTION**

Myocardial infarction is said to be a condition in which the crown in the heart occurs as a result of a sudden blockage of one of the arteries. In this, the heart muscle undergoes necrosis.

Etiology, pathogenesis. In this disease, blood flow along the crown veins, that is, the vessels that supply the myocardium with blood, is disrupted, which leads to the appearance of pain in the heart area or behind the collar. Many of the following factors can hinder the flow of blood along the crown vessels: spasm of the crown arteries, atherosclerotic plaques, the excellent functioning of the myocardium in large physical or nervous strains.

Knowing the close connection between the cardiovascular system and the great cerebral cortex, coronary artery innervation disorders develop and coronary insufficiency

is a major factor in myocardial infarction. In myocardial infarction, from ischemia (decreased blood supply), and then in one or another section, a necrosis furnace also appears. In myocardial infarction, the myocardial tract scar (patch), which has been bleed and necrosis, undergoes scarring. Connective tissue develops, a hard scar is formed. The heart continues its function, but the myocardium weakens after a heart attack. Acute heart failure and cardiac arrest can occur in myocardial infarction, which has extensively damaged the conductive system of the heart. Withdrawal of myocardial infarction:

- Classic or typical-painful; - atypical:

a) in the belly;

(B) asthmatic;

d) uneven heart beat;

e) rejection with changes in the activity of the vessels of the brain;

F) the symptoms are low.

Abdominal gastralgic xylida of myocardial infarction. With symptoms characteristic of the disease of changes in the functioning of the abdominal organs (gastralgic), Khili is accompanied by pain in the upper abdomen, nausea, vomiting, stuttering, hiccups, resting abdomen, diarrhea.

Asthmatic heal of myocardial infarction begins with shortness of breath, wheezing in 20% of diseases with this disease, most often in the elderly. Acute insufficiency of the left ventricle leads to this condition. Develops cardiac asthma, pulmonary edema.

Arrhythmic heal of myocardial infarction begins with an uneven heartbeat. Tremor arrhythmia, ventricular extratystole, varying degrees of blockades, paroxysmal tachycardia; more ventricular Chile may develop.

Cerebrovascular xylida of myocardial infarction is accompanied by circulatory disorders in the brain (cerebral form). At the beginning, the patient's psyche changes, his head rotates, he may faint. Circulatory disorders in the brain are caused by myocardial infarction in which the heart is unable to supply blood to vital organs. This form of myocardial infarction can be accompanied by an uneven heartbeat.

In an unmarked xyli of myocardial infarction, patients are unaware that they have had myocardial infarction. For another reason, when examined at the ECG, a specific change (scar) is found that the myocardial infarction has been performed. Depending on the changes in the ECG, the acute period of myocardial infarction can last from 1-2 days to 10 days. In the acute period, life-threatening complications can develop, which in the first place is a violation of the uneven beating and conduction of the heart. Complications include shock (reflector, cardiogenic and arrhythmic), cardiac asthma, pulmonary edema, acute insufficiency of the left ventricle, development of aneurysm in the heart muscle, perforation of the heart wall, the appearance of an acute wound in the stomach, intestines, bleeding, development of pancreatitis.

In laboratory testing, leukocytosis is observed in the blood. ECHT is in moderation on the first days and begins to rise on the 2 - 3rd. In the following years, several new methods

of Investigation have been proposed that confirm myocardial infarction. Enzymes commonly used in diagnosing myocardial infarction include myoglobin, LDG, KFK. An increase in the amount of enzymes in the blood is observed in 85% of myocardial infarction.

ECG data is very important in the diagnosis of myocardial infarction, as examination with ECG allows for an accurate determination of the location of the infarction, visualizing the depth, width of the part of the myocardium that is necrosis. When necrosis occurs in the myocardium, a pathological tooth (Q) appears, leaving the tooth t negative (i.e. downward pointing) (Figure 1).

Treatment. The treatment of myocardial infarction is carried out in a special ambulance machine brigade, hospitals, Polyclinic, sanatorium. It is necessary to provide him with quick help until the patient is brought to the hospital. Medicines are used to reduce pain relief, heart rate. The patient is admitted to the intensive care unit of the hospital. Lying in the position without moving, psychic, physical tranquility are provided.

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