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Research Article

PREVENTION AND DIAGNOSIS OF CIRCULATORY DISEASES IN OLD AGE

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ABSTRACT

The heart is a biological pump that moves blood through a closed system of vessels, pumping about 6 litres of blood every minute. Age-related changes in the circulatory system in old age severely limit its adaptive capacity and create conditions for developing diseases. In old and old people, the number of active capillaries per unit area is significantly reduced. Tissues and organs cease to receive the nutrients and oxygen they need, leading to starvation and disease. Cardiovascular disease is the most common cause of death in humans.

KEYWORDS

CVDs (cardiovascular disease), AH (arterial hypertension), efficacy, risk factors, prevention.

INTRODUCTION

Cardiovascular disease is the scourge of our time and is the leading cause of death worldwide. No other disease causes more deaths each year than strokes, heart attacks, deep vein thrombosis and pulmonary thromboembolism. An estimated 17.9 million people died from CVDs in 2016, accounting for 31 per cent of all deaths worldwide. 85 per cent of these deaths were due to a heart attack and stroke. Because heart and

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vascular processes are very similar, they form a group of cardiovascular diseases. These include heart attacks (lung, kidney, ischaemic heart disease (including myocardial infarction), cerebrovascular disease, peripheral artery pathology, heart defects and venous thrombosis. To prevent such vascular disasters, timely diagnosis and regular treatment are needed. Taking into account the prevalence of heart diseases among the elderly, the risk of their occurrence in young people, the disabling «abilities» of cardiovascular pathologies and the high mortality from them, it is important to identify cardiovascular diseases in time, then prescribe their competent treatment.

RESEARCH OBJECTIVE

To study current characteristics and prevention of cardiovascular diseases in the elderly.

MATERIALS AND METHODS

A retrospective analysis of the medical records of 40 patients aged 60 and over was performed for cardiovascular diseases in the period 2020-2021.

RESULTS AND DISCUSSIONS

With age in each person small vessels are increasingly «blocked» by lime deposits, and peripheral vascular resistance increases. This leads to a slight increase in blood pressure. Arterial hypertension (AH) remains a major risk factor for cardiovascular morbidity and mortality. Among the study group, AH was overwhelmingly associated with other cardiovascular diseases. Most patients were given combined therapy (n=34).

However, the development of hypertension is greatly hindered by the fact that with the reduction of the muscle wall of the large vessels the venous beam is widened. This leads to a reduction in the minute volume of the heart and to an active redistribution of peripheral blood circulation. The older you get, the more heart fibers atrophy. The so-called «elder heart» develops. There is progressive myocardial sclerosis, and at the place of atrophied muscle fibers of cardiac tissue develop fibers of non-working connective tissue. The strength of heart reductions is gradually decreasing, and exchange processes are increasingly disrupted, creating conditions for energy-dynamic heart failure under conditions of stress. Studies have shown that aging changes the effects on the cardiovascular system of different brain structures. In turn, the feedback is also changing: reflexes from the baroreceptors of large vessels are weakened. This leads to a breakdown in blood pressure regulation. As a result of all these processes, the physical efficiency of the heart declines with age. This limits the range of body reserves and reduces the efficiency of the body's work.

At first, heart changes are adaptive and not clinically evident. Clinical symptoms (such as shortness of breath) occur first at physical exertions, then tolerance to them decreases, shortness of breath occurs at small loads, then in peace and even lying down.

Risk factors for cardiovascular disease are smoking, increased plasma cholesterol and blood pressure. Obesity, diabetes mellitus, psychosocial stress, excessive alcohol consumption are becoming increasingly important. A characteristic of older persons is a combination of disfigurement of organs and systems, the presence of several diseases requiring multiple prescriptions.

In order to prevent the development of cardiovascular diseases and the development of aggravation of the disease, it is necessary to adopt a healthy lifestyle, which includes: physical activity, which is shown to any patient, but its volume depends on the initial state of

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health, the patient's preparedness for physical activity, from the presence of chronic diseases. Physical training improves a patient's psychological status and increases his resistance to physical activity. Moreover, maintaining healthy body weight, ensuring a balance between the amount of energy consumed and physical activity. In addition, food must be rich in vitamins, potassium salts, magnesium, calcium. It is necessary to learn to relax in stressful situations, as well as to have a full sleep.

CONCLUSIONS

Reducing the risk of diseases of the circulatory system is one of the relevant topics of modern medicine. In order to achieve this objective, the incidence of hypertension must be reduced through the implementation of national policies aimed at combating behavioural risk factors, including harmful alcohol use, lack of physical activity, excess body weight, obesity and high salt intake. A comprehensive risk-based approach is needed for the early detection and cost-effective management of hypertension to prevent myocardial infarction, stroke and other complications.

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