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НА ПЕРЕКРЕСТКЕ НАУК»

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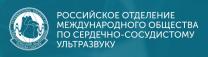














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Содержание тезисов воспроизведено в полном соответствии с представленными материалами без правок.

RISK FACTORS IN YOUNG PATIENTS WITH MYOCARDIAL INFARCTION

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Cardiovascular diseases (CVD), in particular myocardial infarction (MI), remain the leading cause of mortality at a young age.

The purpose of the work is to study the features of risk factors for MI at a young age.

Materials and methods of research. The study consistently included 108 patients aged 18 to 45 years with a confirmed diagnosis of MI with and without ST segment elevation, who were admitted to the cardiac intensive care unit of the Tashkent medical Academy multidisciplinary clinic from January 1, 2020 to January 1, 2022. The comparison group consisted of 35 elderly patients with MI aged 60 to 75 years. The criteria for non-inclusion in the study were acute and chronic diseases in the acute stage, atrial fibrillation, type 1 diabetes mellitus, severe liver and kidney dysfunction, mental illness, dementia. All patients included in the study signed a voluntary informed consent to participate in it. Upon admission to the clinic, an assessment of clinical-anamnestic and laboratory-instrumental data was carried out. The indicators of general and biochemical blood tests, lipid spectrum, indicators of the hemostasis system, albumin excretion in urine were evaluated. The comparison of the average values in the case of a normal distribution was carried out by calculating the Student's t-test, in the absence of a normal distribution, the Mann-Whitney U-test. Nominal data were compared using Pearson's x2 criterion. The differences in the indicators were considered statistically significant at a significance level of p<0.05.

Results. Upon admission to the hospital, the average age in the group of young patients was 41.0 (38.0-43.0) years, in the group of elderly – 67.5 (64.0-71.3) years (p=0.000). In the cohort of young people, STEMI was 1.7 times more common (84.3 vs. 48.5%, p=0.000). It was found that males were 2.3 times more common among young patients (85.2% vs. 37.1%, p=0.000). Young patients with MI were 3.4 times more likely to smoke (70.2% vs. 20.6%, p=0.000) and

3.4 times more likely to have heredity burdened by the early onset of coronary heart disease (CHD) (54.6% vs. 16.0%, p=0.001). Among elderly patients, the main risk factors for MI were arterial hypertension (88.2% vs. 58.8%, p=0.002) and type 2 diabetes mellitus (29.4% vs. 7.4%, p=0.000). In both groups, there was a high prevalence of overweight and obesity: 68.2% among the young and 71.4% among the elderly, as well as physical inactivity: 68.5% among the young and 66.7% among the elderly. When evaluating laboratory data at admission to the clinic, dyslipidemia was detected in 92.2% of young patients and 100% of elderly patients. High aggregation activity of platelets with adenosine diphosphate was observed in both groups: 8.0 (6.0-10.0) seconds in the young and 7.0 (6.0-7.0) seconds in the elderly. The majority of patients had high urinary albumin excretion: 71.1% among young and 88.9% among elderly patients.

Conclusion. The prevailing risk factors for MI among young patients, compared with the elderly, are male sex, smoking and heredity burdened by the early onset of coronary heart disease. On the contrary, arterial hypertension and type 2 diabetes mellitus are more typical for the elderly. Nevertheless, more than half of the young patients had a history of hypertension. Attention is drawn to the high prevalence of dyslipidemia, overweight and obesity, as well as physical inactivity in both age groups. Thus, according to the study, the profile of risk factors for MI at a young age includes: male sex, smoking, heredity burdened by the early onset of coronary artery disease, hypertension, dyslipidemia, overweight hypodynamia, thrombogenic obesity, orientation of the platelet link of hemostasis, endothelial dysfunction and the phenomenon of early vascular aging.

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