

The Occurrence of Burning Diseases when Ischemic Heart Disease and Metabolic Syndrome Come Together

Tog'aydullayeva Dildora Dilmurodovna

Assistant of the Clinical Sciences Department Asia International University, Bukhara, Uzbekistan

Annotation. *Metabolic syndrome (MS) is a process that includes several cardiometabolic risk factors and is characterized by four main components, including: obesity, dyslipidemia, hypertension, and impaired glucose tolerance, and increases the risk of cardiovascular disease. In the study of dyslipidemia and diabetes in adults, metabolic syndrome prevalence is 33.7%, of which men are 24%, women are 42%. Each component of the metabolic syndrome is a separate risk factor, and an increase in their number leads to the aggravation of cardiovascular diseases.*

The purpose of the study. Study of prevalence of components of metabolic syndrome in patients with ischemic heart disease. significantly depends on the timeliness of its detection, which gives a special relevance and significance of the problem of studying risk factors and early diagnosis metabolic disorders.

Keywords: *metabolic syndrome, overweight, blood pressure, dyslipidemia*

According to the criteria of the International Diabetes Association Federation), MS is diagnosed in children over the age of 10 years in the presence of abdominal obesity and two or more of the following criteria: increased triglyceride levels, decreased high-density lipoprotein (HDL), hypertension, increased blood glucose levels . There is an opinion that more important in the development of coronary heart disease (CHD) is not the fact of obesity itself, which is certainly a risk factor, but the lack of sufficient physical activity in the most overweight patients. Other authors talk about the need to take into account in studies the status of smoking and the presence of chronic obstructive pulmonary disease in lean patients, which could be powerful factors for poor prognosis. Moreover, weight loss in most diseases is initially a powerful factor in poor prognosis Back in 1947, J. Vague identified two variants of the distribution of adipose tissue - android (male, "apple-shaped") and gynoid (female, "pear-shaped") and noted the most common combination of android type of obesity with type 2 diabetes, coronary artery disease, gout

Research materials and methods. 70 patients aged 45 to 74 who were admitted to the cardiology dispensary of Bukhara region and diagnosed for 4 months were examined. Demographic data of the patients, including: age, gender, physical activity, medical history and treatment measures were analyzed at the initial examination. Laboratory and instrumental examinations: general blood analysis; blood biochemical analysis; lipid spectrum (triglycerides, triglycerides, triglycerides and PZLP), postprandial glucose tolerance test, height and weight of patients in light clothes without shoes according to the Seca scale (Germany), abdominal circumference, blood pressure in a sitting position and body mass index were examined.

Results and analyses. In the cardiology dispensary of Bukhara region, there were 65 people, 25 women and 40 men, the average age was 51 ± 5.58 years. 35.7% of YUIK +obesity +AG, 23.4% of YUIK +obesity +type 2 diabetes and 17.8% of YUIK +obesity +high PZLP. The coexistence of UIC + obesity + AG was more common in the middle-aged and elderly (45-74 years) male population, i.e. 43.1%. During the study, the medical history of the patients was studied and their harmful habits were analyzed. There were 16 smokers and alcohol drinkers among the men who participated in the study, making up 38%. In patients with CKD +obesity +type 2 diabetes mellitus, comorbidities (related to changes in cerebral blood vessels, retinal vessels, and kidneys) were more frequent than the other group, making 11.2%.

In conclusion, it was found that among the components of the metabolic syndrome, AG is the most common in men, which in turn indicates the presence of risk factors (smoking, drinking, hypodynamia), as well as the presence of concomitant diseases in patients with the metabolic syndrome + obesity + type 2 diabetes.

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