



The State of Comorbidity in the First and Second Stages of Arterial Hypertension

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Abstract: Purpose of the study: to study the gender characteristics of comorbidity in arterial hypertension of 1 and 2 degrees at the age of 45-74 years.

Material and Methods. Patients with arterial hypertension of 1 and 2 degrees at the age of 45-74 years were examined. The study used the 2014 WHO STEPS health and social questionnaire to determine the epidemiology of noncommunicable diseases. Patients with myocardial infarction, type 1 diabetes mellitus, unstable angina pectoris, pheochromocytoma, fluctuating arrhythmia, acute cerebrovascular accident, dyscirculatory encephalopathy, urolithiasis, cholelithiasis, bronchial asthma, COPD were excluded.

Results and discussion

In the course of studying the features of the course of hypertension depending on gender, very interesting facts were obtained, indicating the relationship between the mechanism of development of hypertension and existing metabolic disorders of other substances in the body. In particular, the relationship with the hormonal, biochemical and cytokine status. Ultimately, a comorbid course of hypertension was established, that is, each patient with hypertension has at least 2 or 3 concomitant diseases and conditions.

Depending on the gender and severity of hypertension, an analysis of the state of comorbidity was carried out (Table 1.).

Of all patients with AH in the 1st group (634), 544 (69.3%) and in the 2nd group (757) 259 (34.2%) had comorbidity. At the same time, among all men of the 1st group (n176) 111- (63.1%), and among all women of this group (-458) 274 (59.8%) have concomitant diseases. The obtained facts confirm the increase in cases of comorbidity in men with hypertension of the 1st degree of severity.

Table №1. The frequency of comorbidity in hypertension in the examined patients

Age of patients	1-group				2-group			
	Men		women		Men		Women	
	abs	%	abs	%	abs	%	abs	%
CVD	132	45.7	67	51.5	147	45.5	242	51.4
COPD	6	2.1	0	0.0	3	0.9	6	1.3
osteoporosis	3	1.0	1	0.8	2	0.6	1	0.2
overweight	64	22.1	25	19.2	91	28.2	117	24.8
obesity 1-st	44	15.2	21	16.2	41	12.7	52	11.0
Obesity 2-st	7	2.4	9	6.9	5	1.5	23	4.9

Obesity 3-st	2	0.7	1	0.8	1	0.3	5	1.1
retinal angiopathy	18	6.2	1	0.8	18	5.6	8	1.7
chronic pancreatitis	7	2.4	1	0.8	6	1.9	0	0.0
Chronic pyelonephritis	4	1.4	1	0.8	2	0.6	5	1.1
Osteochondrosis	0	0.0	0	0.0	1	0.3	1	0.2
Rheumatoid arthritis	1	0.3	0	0.0	1	0.3	5	1.1
peptic ulcer	1	0.3	1	0.8	1	0.3	2	0.4
Anemia	0	0.0	2	1.5	1	0.3	4	0.8
Osteochondrosis	0	0.0	0	0.0	3	0.9	0	0.0
Total	289	100	130	100	323	100	471	100

Such a tendency towards an increase in cases of comorbidity is observed in men with hypertension of the 2nd degree of severity. At the same time, out of all men of the 2nd group (n490), 185 (37.8%), and among all women of the 2nd group (n418) 305 (72.9%) there is another concomitant disease. Therefore, AH is characterized by a comorbid course. Regardless of the severity of hypertension in men, comorbidity is (n666) 296 (44.4%), in women comorbidity (n876) is -579 (66.1%).

The information obtained shows the importance of taking into account the gender characteristics of the formation and course of hypertension depending on age.

Analysis of the nosological structure of comorbidity in AH showed the predominance of cardiovascular diseases (CVD), regardless of gender. Of all men with hypertension, 279 (41.9%), and among all women with hypertension, 309 (35.3%) had CVD, which in general is 38.2% of all examined, and 79.5% of all hypertensive patients with comorbidity.

The second place in comorbidity in hypertension is occupied by overweight and obesity. During the analysis by BMI, it was found that men of group 1 were more overweight than women of group 1. In the 1st group, 64 (22.1%) men and 25 (19.2%) women were overweight, and in the 2nd group - 91 (28.2%) men and 117 (24.8%) women. In grade 1 AH, men were 2.9% more overweight than women, and in grade 2 AH, women were 3.3% more overweight than men. That is accelerated the emergence of excess weight in women.

Obviously, with 1-degree AH, overweight in men increased by 6.1%, and in women by 5.6%. The total overweight was 297 (19.1%).

In concomitant pathology, obesity of the 1st degree was often observed after overweight. Obesity of the 1st degree was detected in 44 (15.2%) men of the 1st group, 21 (16.2%) women, 41 (12.7%) men and 52 (11%) women of the 2nd group. A total of 158 (10.2%) patients, of which 85 (53.8%) men, 73 (46.2%) women, had grade 1 obesity.

The third place of comorbidity is occupied by angiopathy of the retina in men - 36 (9.2%), regardless of the severity of hypertension.

Conclusion

Thus, the obtained data of the study showed the importance of taking into account the comorbid condition in patients with hypertension for the timely early prevention of complications and predicting the course of the underlying disease. The fact of the presence of comorbidity proves the complexity of the mechanism of development of hypertension and its complications. Therefore, the time has come to study protein growth factors and damage in AH in order to optimize the tactics of managing patients in this category.

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