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## L.A. Lytkina, L.G. Chibyeva NCAIDS- GASTROPATHY IN PATIENTS WITH CARDIAC DISEASE

DOI 10.25789/YMJ.2018.63.10

### ABSTRACT

The character of clinical endoscopic features of gastropathies, induced by the intake of non-steroidal anti-inflammatory drugs, was evaluated in patients with cardiac pathology.

The clinical picture of NSAIDs-gastropathies in patients with IHD was characterized by a mismatch of symptoms and endoscopic changes. This manifested itself in the fact that in the presence of a bright endoscopic picture (erosion, ulcer), NSAIDs-gastropathies were often asymptomatic. In contrast, in most patients who have noticed pain or other dyspeptic disorders, endoscopic examination revealed minimal changes in the mucosa of the gastroduodenal zone. Therefore, carrying out endoscopic control, preferably in the early stages of treatment, is the most necessary and mandatory method of preventing serious complications.

**Keywords:** nonsteroidal anti-inflammatory drugs, gastroduodenal lesions, gastric ulcer, ischemic heart disease.

### Introduction

Today one of leading places in medical practice is occupied by nonsteroid antiinflammatory medicines (NCAIDs). Medicines of this class have a wide range of clinical effects and are used at diseases of osteomuscular and cardiovascular system and also at a number of other states and diseases [4]. It is no secret that NCAIDs can cause a number of undesirable reactions owing to which the therapeutic value of this class of medicines can be significantly limited [1, 6]. Traditionally on the first place among these reactions put the NCAIDs -gastropathy. The term a NCAIDs-gastropathy designate the erosive cankers of a gastroduodenal zone which are arising against the background of intake of these medicines and having the reference klinik and endoscopic picture.

This pathology is bound to systemic action of NCAIDs and develops irrespective of a way of introduction with formation of erosion and ulcers in the mucosa of the top departments of digestive tract, and in certain cases with complications life-endangering - bleedings and perforations [5, 7].

The ischemic heart disease occupies one of the leading positions in structure of incidence of the population. The pathogenesis of an ischemic disease is characterized by the developing and progressing violations of system of a hemostasis that dictates need of use of continuous antiagregantny therapy. The "gold" standard for this purpose are the medicines created on the basis of Acidum acetylsalicylicum (AAS) [2].

The long-lived reception by ischemic heart disease patients of Acidum

acetylsalicylicum increases risk of emergence of the dyspepsia phenomena and also development of erosion and stomach ulcers and the duodenum. In this regard there are relevant questions of early diagnostics and adequate therapy of the NCAIDs -gastropathy with ischemic heart disease patients [3].

**Research objective** – to estimate the nature of clinical and endoscopic features of the gastropathies induced by intake of nonsteroid antiinflammatory medicines at patients with heart pathology.

### Material and research techniques

The research included 87 patients, with the ischemic heart disease patients various forms which were on treatment in "YGB №3" and cardiological office of the Yakut city hospital. The gastropathy induced by reception of NCAIDs took place in 32 cases that made 36,8% of

total number of observations. All patients included in a research the progressive time took various AAS drugs. Therefore, all presented cases of defeat of a gastroduodenal zone at ischemic heart disease patients, allow us to believe presence of the NCAIDs -gastropathy at them. Average age of the surveyed  $63.7 \pm 3.5$  years.

For the solution of objectives there were conducted: clinical (studying of complaints, collecting anamnesis of a disease, data of objective physical inspection) and laboratory and instrumental research methods.

By all patient included in a research besides all-clinical inspection it was carried out esophagogastroduodenoscopy which is the main instrumental method of confirmation of presence at the patient of the NCAIDs -gastropathy

**Results and discussion.** In the analysis of the IHD various forms it became clear that the most often erosive defeats of a gastroduodenal zone meet at patients with the progressing stenocardia (59,4%) and a sharp myocardial infarction (21,8%). And only 6, 2% fell to the share for the first time of the arisen stenocardia.

As a result of the conducted clinical examination from 32 ischemic heart disease patients with the diagnosed NCAIDs -gastropathy clinical manifestations were observed at 21 (65,6%). By results of studying of complaints of the most often sick slight pains and feeling of a discomfort in epigastric area 14 (66,6%) disturbed. Dyspepsia symptoms in the form of nausea, vomiting and heartburn were noted in 23, 8%, 4,7% and 14,3% of cases.

The carried-out analysis of risk factors showed that at patients of an ischemic heart disease with the - NCAIDs gastropathy such factors as an age generally prevail 65 years (71,9%) and duration of administration of drugs of this group (68,7%) are more senior.

It should be noted that the clinical picture was characterized by discrepancy between a symptomatology and endoscopic changes. It was shown by the fact that in the presence of a

bright endoscopic picture (an erosion, an ulcer) NCAIDs -gastropathies often proceeded asymptotically. On the contrary, at most of the patients, noting pains or other dyspepsia frustration, at an endoscopic research minimum changes of a gastroduodenal zone mucosa came to light.

At assessment of an endoscopic picture at patients from the ischemic heart diseases accepting NCAIDs the polymorphism of changes of a mucosa of a gastroduodenal zone was noted. The simple and multiple erosion of a mucosa of a stomach localized in antral department - 63,2% and also hyperemia and hypostasis mucous a stomach of 24,5% of patients met most often. 8,6% with the most frequent localization in a bulb fell to the share of erosion of a mucosa of a duodenum. Stomach ulcer and a duodenum were found in 3,7% of cases, of them the majority was made by duodenum bulb mucosa ulcers.

#### Conclusion

Thus, clinical manifestations of the NCAIDs -gastropathy and changes revealed at an endoscopic research in a mucosa of a gastroduodenal zone of ischemic heart disease patients in most cases do not correspond therefore endoscopic monitoring, especially in early terms of treatment, is an obligatory method of prophylaxis of heavy complications (bleedings, perforations).

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