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The clinical course of arterial hypertension in elderly and senile age patients with the fracture of proximal femur complicated by system osteoporosis

242 elderly and senior people with proximal femur fractures have been studied for the development of the arterial hypertension. The research showed that the fracture of the proximal femur of senior patients is accompanied by destabilization of the arterial hypertension and increasing risk of developing disease complications from the equations of the cardiovascular system.

The actuality. In the city of Yakutsk frequency proximal femur fractures against osteoporosis (OP) on the average for a year makes 162,2 on 100 000 persons and exceeds the all-Russian indicators (105,9) in 1,5 times (2, 6). 60 % of patients with pathological proximal femur fractures (PFF) suffer with arterial hypertension (AH) (5). Thus, combination AH and PFF is not only important medical, but also a social problem.

The work purpose. To study the current of AH at elderly and senior patients with fracture of proximal femur complicated by osteoporosis.

Material and research methods. The research is spent on the base of the Republican hospital №2 - the Center of emergency medical aid in Yakutsk. 242 elderly and senior age patients with AH and with fracture of proximal femur complicated by osteoporosis are surveyed. On the mechanism all fractures have been received at falling from height of the growth. Diagnosis AH established according to National recommendations on diagnostics and treatment AH, developed by Committee of experts of the All-Russia scientific organization of cardiologists (Moscow, 2010).

Results. The raised level the arterial pressure (AP) is registered at hospitalization at 232 (95,9 %) patients. During the hospitalization the quantity of patients with level AP with the following AH I - II - III the item in both age subgroups changed nonlinear with fluctuations, both towards reduction, and towards increase. Within the first 5 days of hospitalization with level systolic AP(SAP) =140-159 mm hg varied relative density of patients at patients of advanced age from 31,7±4,2 % (3 days) to 38,3±4,4 % (2 days), at patients of senile age - from 32,8±4,2 % (3 days) to 37,8±4,4 % (4 days). Relative density of patients with level systolic AP=160-179 mm hg varied to a subgroup of patients of advanced age from 21,7±3,8 % (5 days) to 30,8±4,2 % (1 days), in a subgroup of patients of senile age - from 16,4±3,4 % (5 days) to 36,9±4,4 % (2 days).

Thus the maximum values the SAP to figures 176,7±2,1mm hg were observed within 1 days of hospitalization and to figures 175,5±2,0 mm hg in day of operation.

Discussion. Research has shown that AH at patients elderly and senior age with fracture of proximal femur complicated by osteoporosis is characterized the astable current, the raised variability of systolic hypertension, high level of pulse pressure, frequent development of cardiovascular complications (p=0,0005).

Conclusions. Fractures proximal department of a femur at patients of senior and senile age is accompanied by destabilization of current AH and increases risk of developing disease complications from the equations of the cardiovascular system.

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