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ТИББИЁТДА ЯНГИ КУН
НОВЫЙ ДЕНЬ В МЕДИЦИНЕ
NEW DAY IN MEDICINE

Илмий-рефератив, маънавий-маърифий журнал
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ООО «ТИББИЁТДА ЯНГИ КУН»

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FEATURES OF CHANGES IN BLOOD PRESSURE IN PATIENTS WITH METABOLIC SYNDROME

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✓ ***Resume***

Between 2020 and 2022 354 patients aged 20 to 80 years (190 men and 164 women) with newly diagnosed MS were prospectively examined. Average values of daily systolic and diastolic blood pressure were found in patients aged 61-80 years: systolic blood pressure - 156.9 ± 3.5 mm Hg. Art., diastolic blood pressure - 96.2 ± 4.1 mm Hg. Art. With increasing age in patients with MS, the frequency of identifying risk factors for cardiovascular complications increases. It is necessary to conduct dynamic monitoring of patients with signs of metabolic syndrome with regular examinations to identify signs of violations of the state of the cardiovascular system, in particular, blood pressure.

Key words: metabolic syndrome, overweight, blood pressure, dyslipidemia.

ОСОБЕННОСТИ ИЗМЕНЕНИЯ АРТЕРИАЛЬНОГО ДАВЛЕНИЯ У БОЛЬНЫХ МЕТАБОЛИЧЕСКИМ СИНДРОМОМ

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✓ ***Резюме***

В период с 2020 по 2022 г. проспективно обследовано 354 пациента в возрасте от 20 до 80 лет (190 мужчин и 164 женщины) с впервые выявленным РС. Средние значения суточного систолического и диастолического артериального давления выявлены у пациентов в возрасте 61-80 лет: систолическое артериальное давление - 156,9±3,5 мм рт.ст. ст., диастолическое артериальное давление - 96,2±4,1 мм рт.ст. Искусство. С увеличением возраста у больных РС увеличивается частота выявления факторов риска сердечно-сосудистых осложнений. Необходимо проводить динамическое наблюдение за больными с признаками метаболического синдрома с регулярными осмотрами для выявления признаков нарушений состояния сердечно-сосудистой системы, в частности артериального давления.

Ключевые слова: метаболический синдром, избыточная масса тела, артериальное давление, дислипидемия.

METABOLIK SENDROMLI BESORLARDA QON BOSIMI O'ZGARISH XUSUSIYATLARI

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✓ ***Rezyume***

2020 va 2022 yillar oralig'ida 20 yoshdan 80 yoshgacha bo'lgan 354 bemor (190 erkak va 164 ayol) yangi tashxis qo'yilgan MS bilan prospektiv tekshiruvdan o'tkazildi. 61-80 yoshdagi bemorlarda kunlik sistolik va diastolik qon bosimining o'rtacha qiymatlari aniqlandi: sistolik qon bosimi - 156,9 ± 3,5 mm Hg. Art., diastolik qon bosimi - 96,2 ± 4,1 mm Hg. Art. MS bilan og'rigan bemorlarda yoshning oshishi bilan yurak-qon tomir asoratlari uchun xavf omillarini aniqlash chastotasi oshadi. Metabolik sindrom belgilari bo'lgan bemorlarni yurak-qon tomir tizimi holatining buzilishi belgilarini, xususan, qon bosimini aniqlash uchun muntazam tekshiruvlar bilan dinamik monitoringini o'tkazish kerak.

Kalit so'zlar: metabolik sindrom, ortiqcha vazn, qon bosimi, dislipidemiya.

Introduction

Around the world, about 25% or 1.7 billion people are overweight, and more than 312 million people are severely obese. It is generally accepted that obesity is considered a risk factor for many diseases [4,7]. Among the causes of morbidity and mortality in the population, cardiovascular diseases (CVD) are considered the main ones. A large role in this was played by the high prevalence of metabolic syndrome (MS) and its unfavorable impact on the course and prognosis of patients with CVD [2,4,8]. Numerous studies have confirmed the connection between MS and arterial hypertension (AH). According to the Framingham study, newly diagnosed hypertension is combined with obesity and overweight in 70% of cases [1,9].

Hypertension is an early and common clinical manifestation of MS. However, it differs in a number of features. Hypertension is often manifested by tachycardia at rest, changes in the circadian rhythm of blood pressure of the non-dipper type and a high level of pulse blood pressure, an increase in peripheral vascular resistance [3,5,10]. According to 24-hour blood pressure monitoring (ABPM), patients with hypertension with metabolic changes are diagnosed with more pronounced disturbances in the circadian rhythm of blood pressure, higher levels of pressure load at night and increased variability compared to patients with hypertension without metabolic disorders, as well as maintaining high rates of complications and mortality in the population of patients with hypertension, even with blood pressure control [5,6].

The purpose of the work is to assess the daily level of blood pressure in patients with certain components of the metabolic syndrome.

Materials and methods

The study was carried out at the regional cardiological clinic in the period from 2020 to 2022. A total of 354 patients aged from 20 to 80 years (190 men and 164 women) with newly diagnosed MS were examined. The patients were divided into groups according to age from 20 to 44 years - 101 patients, 45-60 years - 129 patients, 60 years and older - 124 patients. To study the clinical course of MS in these patients, the patients' complaints and anamnesis were studied using clinical, instrumental and laboratory examination methods.

The study included patients with varying degrees of overweight and/or obesity, abdominal obesity, arterial hypertension (AH), impaired glucose tolerance and/or type 2 diabetes mellitus, and dyslipidemia.

The criteria for excluding patients from the study were: symptomatic hypertension, a history of cerebrovascular accidents, chronic nonspecific lung diseases, kidney and liver diseases. The study also did not include patients receiving constant drug therapy for hypertension, as well as taking glucocorticoids, oral contraceptives, non-steroidal anti-inflammatory drugs, or drinking more than 50 g of alcohol daily. To diagnose metabolic syndrome, the definition of the International Diabetes Federation (2005) was used, according to which abdominal obesity is considered as the main component for diagnosing metabolic syndrome:

- abdominal obesity: waist circumference in men >94 cm, in women >80 cm, in combination with two or more components of the following - arterial hypertension: SBP level >130 mm Hg. Art. and/or DBP >85 mm Hg. Art.; HDL cholesterol level < 1,0 mmol/l, for men and 1,3 mmol/l for women, triglyceride (TG) level -1,7 mmol/l, fasting hyperglycemia 6,1 mmol/l.

Results and discussions

According to the results of the data obtained (Table 1), the average values of daily systolic and diastolic blood pressure in patients in the age group of 60-80 years, systolic blood pressure was 156,9 ± 3.5 mm Hg. Art., and diastolic blood pressure 96,2±4.1 mm Hg. Art. The levels of these indicators were significantly higher than those of the subjects of the first and second groups (p <0.01).

Table 1.

Levels of blood pressure indicators in patients with MS in different age groups

Indicators	Age		
	20-44 years old n=101	45-59 years old n=129	60-80 years old n=124
Sistolic blood pressure mmHg	130,4±2,6	145,2±5,6	156,9±3,5
Diastolic blood pressure mm Hg	86,6±1,7	89,3±3,7	96,2±4,1

Next, the distribution of MS patients with different types of blood pressure response was studied (Table 2).

Table 2.

Distribution of patients with MS depending on blood pressure levels

Options for circadian blood pressure rhythms	Возраст					
	20-44 years old n=98		45-59 years old n=130		60-80 years old n=126	
	abs	%	abs	%	abs	%
Dipper	75	76,5	43	33	29	23
Non-Dipper	9	9,2	66	50,7	49	38,8
Night-Peakers	5	5,1	16	12,3	48	38,1
Over-dippers	9	9,2	5	3,8	-	-

A total of 69 patients (19,4%) showed a night increase (Night-Peakers), with the maximum number of such patients in group 3 – in patients over 61 years of age (38.1%). The value of this indicator was significantly higher than in groups 1 – 5,1% and 2 – 12,3% (p <0,05). Other types of blood pressure disorders - Non-Dipper - were observed significantly more often in patients of the second group (50,7%) compared to patients of the first and third groups, where the value of this indicator was 9,2% (p<0,05) and 38, respectively. 8% (p<0,01).

Normal blood pressure dynamics - Dipper - were detected in the vast majority of patients in the younger age group - in 76,5% of cases, the proportion of such subjects was significantly higher than in the second and third groups, where the values of this indicator were 33,0 and 23%, respectively (p<0,05).

Conclusions

1. It is necessary to dynamically monitor patients with signs of metabolic syndrome with regular examinations to identify signs of disorders of the cardiovascular system, in particular blood pressure.
2. Further in-depth studies need to be conducted to identify factors influencing changes in blood pressure in overweight patients.

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