



## **NON-DRUG TREATMENT OF PATIENTS WITH CHRONIC HEART FAILURE**

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### **ABSTRACT**

About 0.5 million new cases of the disease are registered annually in the world. Moreover, the higher the standard of living in the country, the more often doctors diagnose "Chronic heart failure" (CHF). Its frequency increases markedly with age. However, at any age, CHF requires treatment. And although it is extremely difficult to achieve full recovery, timely and correct therapy not only prolongs life, but also gives a person active longevity. One of the components of this therapy is non-drug treatment.

### **KEYWORDS**

### **Introduction**

- The concept of non-drug treatment of patients with chronic heart failure (CHF) implies the use of such methods as diet, physical rehabilitation, psychological support, patient education and telemedicine.
- In case of heart failure, the patient should always adhere to a diet, which is also called therapeutic nutrition.
- Basic principles of therapeutic nutrition for CHF:
- Limit salt intake to 2 g / day, and in case of severe edema and fluid stagnation – completely exclude;
- Limit fluid intake to 0.8-1 liters per day;
- Frequent meals in small portions (5-5 times a day) are recommended;
- Introduce into the diet foods that enhance the diuretic effect.

In recent years, when evaluating the effectiveness of treatment of heart failure (HF), much attention has been paid to the impact not only on the duration, but also on the quality of life, one of the indicators of which is the patient's ability to lead a habitual lifestyle. Unfortunately, the inability to perform physical exertion without the appearance or aggravation of symptoms of HF is one of the main criteria for reducing the quality of life. Therefore, the possibility and expediency of performing physical activities by patients with HF is important.

The use of telemedicine technologies in the provision of medical care to patients with CHF seems very promising, there are reports of a possible reduction in mortality as a result of the use of telemedicine technologies in the treatment of CHF.

Telemedicine monitoring of patients with CHF after discharge from the hospital improves treatment results, reduces outpatient visits and repeated hospitalizations, and more frequent transmission of patient data increases the effectiveness of such interventions. Telemedicine interventions are also able to reduce the duration of hospitalizations and their total number.

### **The purpose of the study:**

To study the efficacy and safety of non-drug methods of treatment of chronic heart failure (CHF) in patients with various stages of the disease.

The overall goal of this study is to improve the clinical outcomes and quality of life of patients with chronic heart failure (CHF) by integrating readily available and inexpensive technologies.

### **Materials and methods of research:**

The paper considers such methods as diet, physical rehabilitation, psychological support, patient education and telemedicine. The study included 100 patients aged 60 to 77 years, with CHF II-IV functional class according to NYHA, who were hospitalized in the Samarkand Regional Cardiology Dispensary in 2022, and who were divided into two groups. The first group (50 people) received standard drug therapy, the second group (50 people) additionally used non-drug treatment methods, including physical rehabilitation, diet therapy, psychotherapy and relaxation. The duration of observation was 6 months. Clinical symptoms, functional state of the heart, quality of life and side effects of treatment were evaluated.

### **Research results:**

According to the results of 6 months of follow-up, a statistically significant improvement in clinical symptoms, functional state of the heart and quality of life was revealed in patients of the second group compared with the first group. Thus, in patients of the second group, the average dynamics according to the New York Cardiological Association (NYHA) was 8%, and in patients of the first group - 2%. In patients of the second group, there was also a decrease in the frequency of hospitalizations for exacerbation of CHF by 36% ( $p = 0.01$ ) and a decrease in the dosage of diuretics by 22% ( $p = 0.03$ ). The quality of life on the scale of the Minnesota questionnaire "Life with heart failure" (MLHFQ) in patients of the second group improved by 28% ( $p < 0.001$ ), and in patients of the first group by 8% ( $p = 0.04$ ). The side effects of treatment were minimal and did not require discontinuation of therapy.

### **Conclusions.**

The use of non-drug methods of treatment in patients with CHF of functional class II-IV contributes to a significant improvement in clinical symptoms, functional state of the heart and quality of life. Non-drug treatments are safe and effective supplements to standard drug therapy. The introduction of programs with non-drug treatment methods into the complex of rehabilitation measures for patients with CHF is an important component that contributes to improving the clinical condition and quality of life of patients. Non-drug methods of treatment of patients with

CHF should be started in a hospital and continued at the outpatient stage under the control of hemodynamic parameters (blood pressure, heart rate).

Studies have also shown that people with heart failure who receive emotional and social support cope better with their condition and have a more positive outlook on life.

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