

STUDY OF THE IMPACT OF THE COVID-19 PANDEMIC ON THE EFFECTIVENESS OF TREATMENT IN CHRONIC CORONARY HEART DISEASE

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SUMMARY

Definition Coronary heart malady (CHD) is the driving cause of mortality around the world. One of the most commitments of mortality and dreariness in CHD patients is intense myocardial localized necrosis (AMI), which is the result of sudden impediment of an epicardial coronary supply route due to a sudden break of atherosclerotic plaque, causing myocardial ischemia. Within the starting organize of myocardial ischemia, need of oxygen and supplement supply comes about in biochemical and metabolic changes inside the myocardium. Exhaustion of oxygen switches the oxygen consuming cellular digestion system to anaerobic digestion system and disables the oxidative phosphorylation pathway inevitably driving to cardiomyocyte passing. A few thinks about propose an interlink between COVID-19 and ischemic heart malady. An expanded ACE2 receptor expression within the myocardium may somewhat contribute to the myocardial wounds that are watched in patients influenced by SARS-CoV-2. Besides, pre-existing cardiovascular illness, in conjunction with an exasperated provocative reaction which causes an up-regulation in pro-inflammatory cytokines. In addition, patients with atherosclerosis are watched to be more inclined to ischemic assaults when influenced by COVID-19, due to hypercoagulation within the blood as well as raised pro-inflammatory markers.

Keywords: COVID-19; SARS-CoV-2; ischemic heart disease; ischemia; coronary heart disease.

INTRODUCTION

Ischemia is caused due to a decrease in blood stream in an range, as a result of a blockage within the blood vessel. Ischemic heart malady, commonly alluded to as coronary heart infection (CHD), for the most part leads to the narrowing of coronary courses, which essentially supply oxygenated blood to the cardiac muscles. One of the most commitments of mortality and dismalness in CHD patients is intense myocardial dead tissue (AMI). Acute-ST fragment height myocardial localized necrosis (STEMI), which is the result of unexpected impediment of an epicardial coronary course due to a sudden break of atherosclerotic plaque, most commonly influences the cleared out front slipping course (Fellow) (50%), right coronary supply route (30%) [1]and cleared out circumflex course (20%). Atherosclerosis may be a multifactorial dynamic infection of the blood vessel divider and is illustrated by central improvement of atherosclerotic injury or plaque inside the blood vessel divider. Smooth muscle cells (SMCs) and mononuclear phagocytes (MPs) as well as provocative cells such as macrophages, T cells, dendritic cells and pole cells amass within

the injuries as the malady advances. Different hazard components counting dyslipidemia, implicated vasoconstrictor hormones, hyperglycemia, pro-inflammatory cytokines, and smoking facilitate the movement of nearly 50% of the blood vessel injuries. Within the nonappearance of systemic hypercholesterolemia, invigorated T lymphocytes, certain warm stress proteins and plasma lipoprotein actuates aggravation that makes a difference the atherosclerotic plaque arrangement. Incessant irritation can crack the plaque and may lead to ischemia and myocardial localized necrosis. Delay within the rebuilding of the coronary blood stream leads to cardiac cell passing. In the event that intense myocardial ischemia is prolonged, cardiomyocyte passing starts within the sub-endocardium, and over time, spreads towards the epicardium. Within the introductory organize of myocardial ischemia, need of oxygen and supplement supply comes about in biochemical and metabolic changes inside the myocardium. Exhaustion of oxygen switches the high-impact cellular digestion system to anaerobic digestion system and impedes the oxidative phosphorylation pathway driving to mitochondrial layer potential misfortune and along these lines diminishes in generation and restrains the contractile work of the cardiomyocytes. This handle is exacerbated by the hydrolysis of the available Adenosine triphosphate (ATP) due to the invert work of F1F0 ATPase to preserve the mitochondrial layer potential. Anaerobic glycolysis comes about within the collection of lactic corrosive, which increments the intracellular causticity by lessening the pH. Extreme Intense Respiratory Disorder Coronavirus 2 (SARS-CoV-2) The SARS-CoV-2 infection is watched to have an upper hand on the patient's respiratory framework and is additionally seen to influence other imperative organ frameworks. Fever, dyspnea and dry hack were the side effects that were at first detailed in Wuhan, China, where the primary cases of the infection were to begin with found. Be that as it may, with more prominent information from over the world, it is now observed that indications have a more noteworthy run, additionally incorporate intense respiratory trouble disorder (ARDS) [2] with noteworthy levels of hypoxia and can too lead to lethal outcomes, due to different organ disappointment and extreme respiratory disappointment.

MATERIAL AND METHODS

Coronavirus may a single-stranded RNA infection of 30 kb. Concurring to its genomic cosmetics, the infection is isolated into four genera: α , β , γ , and δ . SARS-CoV-2 have a life cycle that comprises of 5 stages, beginning with connection, where the infection ties to the have cell receptors, infiltration, where the infection enters the have cell through endocytosis. The infection is made up of a add up to of four auxiliary proteins, to be specific. Spike comprises of two utilitarian subunits, S1 and S2, out of which S1 takes the obligation of official to the receptor of the have cell and S2 intercedes the combination between viral and cellular films. It has been found that angiotensin-converting chemical 2 [3] (ACE-2) is the useful receptor for SARS-CoV-2 and the spike protein connects to this particular receptor. After authoritative to the have receptor, the spike protein is seen to embrace a protease cleavage by two successional steps, driving to its enactment. Here, the primary cleavage is seen to be at the S1/S2 location, required for preparing and the moment cleavage is at the S2 location, required for actuation. Post cleavage, the part of the S1 subunit is to stabilize the S2 subunit that's secured to the layer. S1 and S2 in any case, stay non-covalently bound to one another.

3. Pathophysiology of COVID-19 Once the infection has entered, the RNA genome of

the infection is discharged into the cytoplasm and viral proteins are synthesized by means of translation and interpretation, and the viral genome is duplicated, and normally, an increment within the viral load is watched. Once within the cell, the viral antigen is displayed by the major histocompatibility complex (MHC) and is recognized afterward by the cytotoxic T lymphocytes. This functional receptor is seen to be exceedingly communicated within the epithelial cells of the lungs, and the receptor is seen to be communicated at tall levels in other organ frameworks as well, such as the heart, kidneys, bladder as well as ileum. The infection is thought to be spread for the most part through respiratory droplets, fecal–oral as well as by means of contact. Viral replication has been seen to require put within the mucosal epithelium of the upper respiratory tract as well as within the gastrointestinal mucosa. Intense liver and heart wounds have been watched, beside the runs and kidney disappointment, proposing that non respiratory indications may moreover play a part, in case not basically, in COVID-19 patients. Clinical discoveries have proposed that patients with COVID-19 have irritated provocative reactions when they created the contamination. Such fast viral replication leads to endothelial as well as epithelial cell passing, together with spillage of blood vessels. This in turn is seen to trigger pro-inflammatory intervening cytokines and chemokines. ACE-2 receptors are found to be exceedingly concentrated in number, within the pneumocytes, on the apical side of these cells. SARS-CoV-2 oversees to enter these cells and annihilate the receptors display. The aviation route entry has its natural immune system built with three imperative components—dendritic cells, macrophages which offer assistance battle off the infection until versatile resistance kicks in, and epithelial cells, as the primary obstruction. Moreover, it moreover has been considered that macrophages and dendritic cells, both being antigen-presenting cells (APC), trigger the T cell-mediated reaction in COVID-19[4]. These APCs can phagocytize the cells influenced by the infection and in this manner were apoptotic. Patients had appeared lifted levels of plasma concentrations of interleukin (IL) 6, IL 10, granulocyte-colony fortifying calculate (G-CSF), monocyte chemo-attractant protein (MCP1), macrophage provocative protein (MIP)1 α , as well as tumor rot calculate (TNF)- α . This upregulation of pro-inflammatory cytokines, moreover commonly alluded to as a “cytokine storm”, has been found to result in multi-organ disappointment, lung damage, as well as the advancement of extreme COVID-19. The forceful discharge of cytokines by the host’s safe framework can result in perilous results such as ARDS, which may lead to drained oxygen immersion levels and this could be lethal.]p0; Relationship of COVID-19 with Cardiovascular Illnesses It has been famous that patients influenced with COVID-19 had a more prominent predominance of the cardiovascular illness, and thinks about found that >7% of the patients with the disease experienced myocardial damage. Cardiovascular infection (CVD) is one of the foremost common comorbidities watched. It is famous that in SARS, the predominance of CVD was 8%[5], and this perception is in line with cases of COVID-19 as well and is particularly slanted to the serious cases. In a specific consider, a gather of 191 patients from Wuhan, China, 48% of patients had co-morbidities, and 8% had CVD. National Wellbeing Commission of China appeared information that proposed that 17% of the patients had CHD. Additionally, 8 ponders conducted had meta-analysis comes about that appeared that among comorbidities, hypertension (17 \pm 7%), Diabetes mellitus (8 \pm 6%), and CVD (5 \pm 4%) were the foremost predominant in COVID-19. How these relationships work is still vague, and thus numerous potential hyp Patients that have debilitated safe frameworks and

comorbidities confront COVID-19 with more prominent seriousness, and those with existing atherosclerosis will be more helpless to ischemia as a result of SARS-CoV2 upregulating provocative pathways and defective coagulation. This may clarify the obsessive impacts of SARS-CoV-2. Additionally, the raised expression of ACE-2 receptors within the myocardial cells may be an clarification behind the relationship between COVID-19 and cardiac wellbeing. Expanded levels of cardiac biomarkers were watched, indicating towards myocardial harm in cases that came up at starting stages in China. In add up to, 7.2% of the hospitalized patients in Wuhan, China, contaminated with the infection, appeared expanded levels of tall affectability cardiac troponin I or unused ECG variations from the norm, recommending the nearness of cardiac harm. National Wellbeing Commission of China detailed that 12% of the patients without known CVD appeared tall levels of troponin when hospitalized. Cardiac troponin (cTn)[6], a portion of the contractile device of cardiomyocytes, is one of the foremost particular and favored biomarkers of intense myocardial harm. Expanded levels of cTn can be recognized inside 3–12 h after the onset of ischemia and reach its top by 12–48 h and start to drop over the another 4–10 days. Besides, heart disappointment, renal disappointment, myocarditis, arrhythmias, aspiratory embolism can cause non-ischemic harm to the cardiomyocytes, which may clarify the increment in troponin level in these obsessive conditions. Be that as it may, ordinary cardiomyocyte turnover, apoptosis, rot and cellular penetrability can increase troponin levels within the blood. The prescribed interim between two blood tests to run the show out MI is 3–6 h. A few thinks about have found expanded cTn levels after strenuous perseverance work out, that diminish or normalize inside 24 h after the continuance work out. Be that as it may, such changes in troponin level are unmistakable from ischemia-induced troponin discharge. Consequently, it is basic to recognize the cardiac causes of troponin increment from the non-cardiac causes of troponin increment. In normal circumstances, cardiac imaging such as echocardiography, a coronary angiogram is utilized to recognize the fundamental cause of myocardial harm. Be that as it may, for the COVID-19 widespread, specific utilize of non-invasive and intrusive cardiac imaging modalities is prescribed. Particular imaging can be considered for COVID-19 patients with an awfully checked increment in cTn. Other than, ECG checking of the COVID-19 patients went with with clinical relationship may help to triage patients within the crisis setting[7]. Precisely how cardiac wellbeing is interlinked with COVID-19 is however to be figured out. A potential theory proposed that ACE-2 receptors may be intervening the myocardial association specifically. ACE-2 subordinate myocardial contamination was watched in a murine demonstrate with pulmonar On that introduce, other instruments of activity recommended to assist clarify this relationship of cardiac complicity with COVID-19, encompass a cytokine storm, that's carried out due to an lopsidedness in reaction within the subtypes of T-helper cells, as well as apoptosis in cardiac myocytes, initiated through hypoxia-induced intemperate intracellular calcium. The precise instrument as to how cardiac tissue is harmed through the contamination is unfamiliar as of however, and so two vital components are hypothesized—the coordinate and the backhanded component. From these, the coordinate component clarifies, that infection particles invade specifically into the myocardial tissue and lead to the passing of cardiomyocytes as well as is capable for aggravation. Against this background, other roundabout components are proposed, such as hypoxemia and respiratory disappointment driving to cardiac aggravation, as well as serious systemic

hyper aggravation driving to cardiac aggravation. Moreover, trademarks of myocardial harm are the Be that as it may, invasiveness, fetched, and necessity of high-level mastery restrain the schedule utilize of coronary angiograms. Echocardiography is generally cheap and broadly utilized to detect changes in myocardial divider thickening and movement inside minutes of the ischemic occasion, be that as it may, its affectability is moo in case of little myocardial damage[8]. Myocardial perfusion imaging may offer assistance to get it the instrument of the harm by distinguishing the designs of myocardial perfusion variations from the norm. For occurrence, territorial perfusion variations from the norm show the likelihood of sort 1 MI, whereas non-atherothrombotic coronary anomalies propose writing 2 MI, and diffuse myocardial perfusion variations from the norm or ordinary perfusion recommends ischemic or non-ischemic myocardial harm. As already built up, ACE-2 receptors are communicated within the myocardial tissue. It has been famous that ACE-2 plays a imperative part within the heart, as extreme cleared out ventricular brokenness has been watched in ACE-2 knockout mice. Having said that, a downregulation of ACE-2 is watched in patients with COVID-19, recommending a conceivable hypothetical instrument behind cardiac breakdown amid the viral contamination .

RESULTS

A critical include of COVID-19 is the nearness of higher levels of cardiac biomarkers . Patients that have been conceded to the seriously care unit and had antagonistic results, as well as mortality, appeared lifted levels of troponin I and brain-type natriuretic peptide (BNP) in Washington. Moreover, 40% of passings in a cohort in Wuhan, China, were due to myocardial harm and heart disappointment, in a few cases, together with respiratory disappointment. An balanced cox relapse demonstrate appeared that the patients at higher dangers of passing had expanded circulating biomarkers of cardiac damage . Interests, it was found that the chance of passing related to intense cardiac harm was altogether higher than that found with earlier history of CVD, DM, age and persistent aspiratory malady . In a cohort of patients in Wuhan, a more prominent rate of patients that were non-survivors and were at basic stages of the illness, had hoisted levels of blood weight, and this indication, may have been due to different issues such as a straightforward response due to the contamination, a plausible inclining figure due to the contamination or is connected to the clutter of expression of ACE-2, which cannot be derived with the previously mentioned information. Besides, patients moreover appeared to have created arrhythmias in patients at serious stages of the contamination and were auxiliary to myocarditis, systemic irritation, hypoxemia as well as metabolic derangements. The hazard of cardiac complications within the influenced people may be lifted due to raised thrombotic proclivity, as proposed by finding more noteworthy levels of D-dimer. The premise of this hazard is different components such as endothelial and smooth muscle actuation, macrophage actuation, platelet actuation as well as tissue figure expression in atheromatous A think about distributed in Walk 2020 found 19.7% [9]of patients that tried positive for COVID-19, had a cardiac damage which heart harm is autonomously connected to an raised chance of mortality. It was seen that as compared to patients that had no cardiac damage, extreme intense sickness was watched in patients that had the cardiac harm, and so, they had lifted levels of C-reactive protein, creatinine levels as well as NT-proBNP, more

noteworthy different mottling, and ground-glass darkness. Moreover, more than 50% [10] of patients that had cardiac damage confronted in-hospital passing in this specific consider, indicating towards the reality that cardiac damage may have been initiated due to COVID-19 and subsequently lead to extreme results. On the opposite, in any case, a later ponder has found restricted sums of interstitial mononuclear inflammatory invades within the cardiac tissue, with the nonappearance of significant myocardial damage in an influenced person, implying that the disease may not specifically harm the heart. By the way, reversible, subclinical diastolic cleared out ventricular disability was found to be common in patients that had intense SARS disease, which recommended that cleared out ventricular brokenness watched in intense stages may be capable for the cytokine storm watched.

DISCUSSION

Besides, 30–60% of the patients with cardiac harm had a history of CHD as well as hypertension, individually, within the previously mentioned ponder conducted in Walk 2020, and these histories were seen to be more predominant in patients that had a cardiac harm, as compared to the ones who did not. It has been expressed that the influenced that are elderly and have basic maladies were more helpless to creating COVID-19 [11] and were seen to fall severely sick, particularly within the patients that had DM, hypertension and CHD. Moreover, within the nearness of preexisting cardiovascular illnesses, intense provocative reactions may lead to ischemia. Amid a systemic provocative reaction, it is watched that fiery action is disturbed within the coronary atherosclerotic plaque, making them more vulnerable to burst. An occlusive thrombus may be shaped over a cracked coronary plaque, caused by irritation driving to endothelial brokenness and raised procoagulant action of blood and consequently it is secure to hypothesize that preexisting cardiovascular malady, in conjunction with an exasperated incendiary reaction may result in cardiac damage, in patients that are tainted with SARS-CoV-2.

CONCLUSION

In conclusion, prove from different information and thinks about proposes that there appears to be an interlink between COVID-19 and CHD, which have been examined comprehensively in this paper. A conceivable speculation may be the truth that ischemic assaults are more inclined in patients that are influenced with atherosclerosis, as the infection forcefully triggers the incendiary pathways and leads to hypercoagulation within the blood, clarifying. Moreover, conceivable thinking behind the relationship between COVID-19 and cardiovascular wellbeing may be due to the tall expression of ACE-2 receptors within the myocardium, which may in portion contribute to the myocardial wounds watched in patients influenced by SARS-CoV-2. Creator composed the paper, basically evaluated the paper, made last proposals; M.B.: Proposed the thought, proposed the structure of the paper, to begin with free analyst. All creators share duty for the choice to yield the original copy for distribution. All creators have perused and concurred to the distributed adaptation of the composition. Subsidizing: This inquire about gotten no outside financing. Educated Assent Articulation: Not appropriate Clashes of Intrigued: The creators announce no strife of intrigued.

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