



## EVALUATION OF THE EFFICACY OF COMBINED USE OF UPERIO AND SPIRONOLACTONE IN ELDERLY PATIENTS WITH CHRONIC HEART FAILURE WITH CORONAVIRUS INFECTION

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<https://doi.org/10.5281/zenodo.7815881>

**Key words:** chronic heart failure, ARNI drugs (angiotensin receptor and neprilysin inhibitors), old age, post-COVID syndrome.

**Abstract:** The effectiveness of the combined use of drugs from the ARNI group and aldosterone antagonists in elderly patients with CHF who underwent coronavirus infection was studied. In patients of group I (main) who took Uperio 24/26 mg and spironolactone 25 mg/day, there was a significant improvement in clinical symptoms (shortness of breath, fatigue, edema), improvement in exercise tolerance, improvement in ECG and EchoCG patterns, a decrease in CHF FC occurred only in 12 (50%) patients. II (control) group who are taking ACE inhibitors, a satisfactory effect in 6 (25%) patients. And in 6 (25%) patients of the II-(control) group, destabilization of the disease was observed in the form of cardiac asthma, pulmonary edema.

**Relevance:** The consequence of a coronavirus infection, in which 20% of people who have had a coronavirus infection suffer from long-term symptoms lasting up to 12 weeks and in 2.3% of cases longer than that. Today, doctors no longer consider Covid-19 a disease of the respiratory system only. Once in the body, the virus interacts with certain receptors, which are most in the vessels of the lungs, heart, kidneys, genitourinary system, etc. Unfortunately, changes in the cardiovascular system are often more common in patients over 60 years of age and with pre-existing heart and vascular diseases. The high prevalence and unfavorable prognosis determine the leading role of chronic heart failure among the most important problems in medicine. In recent years, a large number of researches have been conducted that studying the clinical features of the course of CHF in elderly men and women who have had a coronavirus infection in order to clarify aspects aimed at preventing the development of clinical decompensation and improving life prognosis.

**Purpose of the study.** To study the effectiveness of the combined use of Uperio and Spironolactone in elderly patients with CHF who have had coronavirus infection.

**Materials and methods of research:** 48 patients were under observation aged 60 to 88 years (mean age  $68 \pm 9.3$  years) suffering from CHF and undergoing coronavirus infection, who were diagnosed after a thorough clinical, laboratory and instrumental examination. According to the latest classification of the degree of CHF. (CHF FC - I, FC - II, FC - III, FC - IV NYHA). In 2 patients, CHF FC - II was noted, in 38 CHF FC - III, in 8 patients with severe CHF FC - IV. The duration of the disease was 3-18 years, which averaged  $7.2 \pm 1.2$  years. The cause of CHF in 19 patients was hypertension, in 27 patients with cardiac ischemia, in two patients myocarditis.

All patients in the dynamics underwent a physical examination, determination of heart rate, saturation, blood pressure, registration of ECG, echocardiography. And also conducted a test

for tolerance to physical activity using the test 6 minute walk (6MT). At the same time, the distance from 426 meters to 550 meters corresponds to CHF FC - I; from 301 to 425 meters CHF FC - II; from 151 meters to 300 meters CHF FC - III; less than 150 meters CHF FC - IV FC NYHA. In addition, we studied the hemogram, determined the content of glucose, bilirubin, cholesterol, triglycerides, creatinine and transaminase activity (AST and ALT). In all patients the frequency of dyspnea symptom was studied when bending forward and established its relationship with an unfavorable hemodynamic profile and prognosis, which made it possible to consider this symptom as a reliable marker of heart failure. All patients at the beginning of the study were on previously selected CHF therapy: ACE inhibitors, nitrates, diuretics, antiplatelet agents, anticoagulants, etc. During the research period, only patients of the 1st group ceased ACE inhibitors, patients of the 2nd group did not change this therapy, if necessary, according to strict indications, patients used cardiac glycosides, central analgesics, and oxygen therapy.

All patients were divided into two groups: 24 (50%) patients were treated with Uperio tablets 24/26mg x 2 times a day in the I - (basic) group and Spironolactone tablets 25 mg/day. II - (the control group) consisted of 24 (50%) patients, who received early selected therapy of CHF without the addition of Uperio and Spironolactone. The duration of observation was 4 weeks. Therapy control was carried out on the basis of an assessment of the dynamics of clinical symptoms, the level of blood pressure, ECG and echocardiography data, indicators of the exercise tolerance test (6MT). Statistical analysis of the obtained results was carried out using the methods of variation statistics using Student's criteria.

### Results and discussions.

In patients of the I (main) group who took Uperio 24/26 mg and Spironolactone 25 mg/day, there was a significant improvement in clinical symptoms (shortness of breath, fatigue, edema), improved exercise tolerance, improved ECG and echocardiography in 19 out of 24 patients ( 79.2%); in 4 patients (16.7%), a satisfactory effect was recorded, and only in one patient (4.1%) of the main group, no significant improvement in the dynamics of CHF was observed during therapy. At the same time, a static significant improvement in clinical symptoms, improvement in laboratory and diagnostic indicators of CHF occurred only in 12 (50%) patients. II-(control) group, satisfactory effect in 6 (25%) patients. And in 6 (25%) patients of the II-(control) group, destabilization of diseases was observed in the form of cardiac asthma, pulmonary edema. And they were urgently hospitalized.

**Conclusions:** Thus, the combined use of Uperio 24/26 mg 2 times a day and Spironolactone 25 mg/day was more effective. This combination quickly led to a regression of clinical symptoms. Reducing the duration of treatment makes this combination of drugs more preferable than any other combination of drugs for CHF in elderly patients who have had a coronavirus infection. Such a positive trend contributes to improving the quality and life expectancy of elderly patients with CHF who have had a coronavirus infection.

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