Chronic Ischemic Heart Disease

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- Progressive development of heart failure as a consequence of many years of heart damage due to chronic ischemia
- Pathophysiology
 - results from long standing coronary artery disease
 - contractile myocytes replaced with non-contractile
 - fibrous tissue
- Risk factors
 - diabetes mellitus (most important and considered a CAD equivalent)
 - smoking (#1 preventable factor)
 - HTN
 - cholesterol/lipid abnormalities
 - LDL > 160
 - HDL < 35
 - family history
 - age >45 (men), age >55 (women)

Presentation

- Similar to congestive heart failure
- Angina
 - patient may report history of angina due to reduced perfusion of myocardium

Evaluation

- Chest radiograph
 - massive cardiomegaly, pulmonary vascular congestion, interstitial pulmonary edema.
- Echocardiography
 - dilated cardiomyopathy and reduced ejection fraction.

Treatment

- · Coronary artery disease risk factor management
- Control acute episodes of cardiac ischemia >>
- Heart failure treatment

Complications

- Angina
- Heart failure
 - potential to progress to dilated cardiomyopathy
 - and low output heart failure
- Myocardial infarction
- Sudden cardiac death



Qbank (0 Questions)

Evidence & References Show References



