



THE ROLE OF NURSING CARE IN CARDIOVASCULAR DISEASE

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Article history:	Abstract:
Received: 11 ^h March 2021 Accepted: 28 th March 2021 Published: 10 th April 2021	Nursing care for hypertension. A hypertensive patient should be taught to adhere to sparing regimen, give recommendations on adherence to a rational diet (limit salt intake, exclude spicy and fried foods, strong broths, strive to normalize increased body weight). It is necessary explain to the patient that eliminating bad habits is important component of disease therapy, to convince of the benefits of hardening and dosed physical activity(walks, morning exercises, exercise therapy). It is also necessary to educate the patient's relatives about the importance of proper sleep of the patient to normalize blood pressure. They must learn that during rest, the patient should not be disturbed (it is not recommended to loudly talk, watch TV, listen to the radio). The same conditions must be observed during hospital treatment.

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Warn patient that the action of certain antihypertensive drugs does not occur immediately (for example, when taking inhibitors APF) but accumulates over 7-10 days, so you cannot stop taking drugs without immediately receiving the desired effect. The patient must learn that the therapy of essential hypertension is lifelong. Unauthorized cancellation drugs can worsen the condition and cause serious complications. To control blood pressure, it is necessary to measure it 2 times a day, control the amount of fluid you drink and urine excreted. Methodology these measurements should be explained to the patient and relatives in avoiding erroneous results. The nurse should explain to the patient and his relatives, the rules for collecting urine for tests (OAM, samples Nechiporenko, Zimnitsky), as well as the rules for preparing the patient for delivery blood for general and biochemical analysis, for ultrasound.

Nursing care for coronary artery disease it should be explained to the patient with angina pectoris admission rules medicines. The nurse should pay attention to the patient the fact that nitroglycerin should be taken under the tongue, and not inside. Sick should be aware that while taking some nitrates may occur headache, noise in the head, slight dizziness. These side effects can be avoided by taking nitroglycerin at the same time validol.

If after taking 2-3 tablets of nitroglycerine pain is eliminated, you should call a doctor. In addition, the patient must understand that the treatment of ischemic heart disease is lifelong he needs to be convinced of the need for long-term continuous treatment. The patient must know that a balanced diet and dosed physical activity lead to an improvement in the blood supply to the heart muscle and, as a result, reduction of clinical manifestations of ischemic heart disease. For the prevention of seizures angina the patient must be able to calculate physical activity, proceeding and of the functional class of angina pectoris, try to avoid psycho-emotional stress, learning to control oneself. 6 Considering that the main cause of coronary artery disease is atherosclerotic process in the coronary vessels, one of the components treatment of the disease should be anti-atherosclerotic diet (table number 10 from). The main provisions of the diet: reducing the consumption of fats, foods, containing cholesterol, saturated fatty acids (animal fats, cream, eggs), change when cooking butter on vegetable, increased consumption of foods rich polyunsaturated fatty acids (fish, poultry, seafood), vegetables and fruits, restriction of table salt in food (up to 3-5 g per day).

The patient's special attention should be paid to the frequency and duration of angina attacks. If the attacks become more frequent and longer, occur with less than before, physical exertion or at rest, worse stop nitroglycerin, this indicates the progression of coronary failure, increased risk of myocardial infarction. In that case, the patient should immediately consult a doctor to resolve the issue about hospitalization. Nurse must know in full the rules for providing assistance to a patient during an attack of angina pectoris: 1) provide the patient with complete rest, help him sit or lie down, provide access to fresh air, unfasten the tightening parts of clothing (belt, belt, shirt buttons, untie a tie); 2) give the patient a nitroglycerin tablet under the tongue (or drip 1-2 drops of a drop of nitroglycerin solution on a sugar cube and also put under the tongue); 3) in the absence of nitroglycerin, it is possible use validol (in tablets or drops); 4) with a distracting purpose, you can put mustard plasters on the area heart and back, use hot hand and foot baths or heating pads on the feet and hands; 5) patients with coronary artery disease are on lifelong dispensary observation district doctor and cardiologist. Nursing care for pericarditis. Patients with pericardial effusion should be treated in hospital. They are assigned strict bed rest for 3-4 weeks (up to disappearances effusion in the pericardial cavity). With dry pericarditis, severe bed rest is not indicated, but the patient also needs inpatient treatment, especially in the presence of a severe underlying disease.

After the patient is discharged from the hospital, it is necessary to create conditions for his speedy full recovery, recovery work capacity. It is recommended to avoid hypothermia, physical overloads. Measures to prevent colds are mandatory diseases, remediation of foci of chronic infection. Recommended disclaimer bad habits (smoking, alcohol). 7 The nutrition of a patient who has undergone pericarditis should be high in calories, balanced in proteins, fats, carbohydrates, vitamins, mineral substances, Meat and meat products, fish, vegetables, fruits, juices. Food intake - 3-4 times a day. With absence complications of pericarditis, fluid intake is not limited. Fresh air and metered physical activity are also an important component of rehabilitation. Recommended regularly ventilate the room where the patient lives as he recovers forces showing walks in the fresh air, therapeutic gymnastics, swimming, training on simulators, sports games. If pericarditis has developed against the background of another pathology (systemic connective tissue diseases, tuberculosis, allergies, malignant neoplasms), then it is necessary to organize care in accordance with features of their course.

Nursing care for myocarditis. Patients with myocarditis are prescribed strict bed rest, the duration of which depends on the severity of the disease (from 3-4 weeks up to several months). Patients discharged from the hospital, it is necessary create comfortable conditions, do not allow them to do physical work, and also protect from excessive mental experiences.

Meals should be carried out in accordance with the treatment table No. 10. This diet provides for limiting table salt to 3-5 g per day, some reduction in calorie intake, restriction of consumption free liquid (up to 800 ml per day). Products are prohibited, tonic (natural coffee, strong tea, cocoa, spices), as well as smoked, pickled, fried foods, strong meat and fish broths, lard, lamb and beef fats, products and drinks that can cause flatulence (cabbage, legumes, carbonated the drinks). It is recommended to increase the consumption of vegetables, berries and fruits, so how they enrich the diet with vitamins. In addition, a number of fruits (dried apricots, raisins, apricots, figs, bananas) contain a large amount of potassium, useful to such patients. It is recommended to take food 4-5 times a day, in small portions, the last meal should be no later than 3 hours before sleep. 8 On the recommendation of a doctor (after normalization, all indicators and recovery of the patient) is prescribed exercise therapy. In the classroom use all kinds of exercises for all muscle groups. Gradually attach exercises with shells (balls, sticks, on a bench), classes on simulators. As the patient recovers, it is recommended sedentary sports games, strength development exercises. Mandatory components of exercise therapy for patients with myocarditis are - dosed walking, morning exercises. Exercise therapy classes are carried out at control heart rate, blood pressure. In order to prevent exacerbations of the disease, it is necessary timely identification and sanitation of foci of chronic infection.

You should regularly talk with the patient about the dangers of smoking, taking alcoholic beverages. Within a year after recovery, patients are on dispensary supervision. Nursing care for cardiomyopathy. Patients are shown bed rest for a long time, since its observance reduces the burden on the heart, promotes reduction of manifestations of cardiovascular failure. Duration of bed rest - up to several months, especially with dilated cardiomyopathy. The patient needs to quit smoking and drinking alcohol, since these bad habits lead to even more damage to the myocardium. If symptoms of heart failure are present, the patient should be fed should be carried out within the framework of the treatment table No. 10 (see. Myocarditis) or No. 10 a. Table number 10 provides for an even greater reduction in the load on cardiovascular system, stimulation of urination. Compared to table number 10 in it, the calorie content is further reduced diet. Amount the consumed liquid is limited to 500-600 ml per day. Cookery salt is not added during cooking and is not issued for salting. Food is served to the patient in a grated or chopped form. Products are boiled or steamed, rarely baked. Food should be frequent - 6 times a day, in small portions. It is necessary to carefully monitor the patient's condition, monitor the general condition, skin color, and position sick, count the pulse, measure blood pressure and daily urine output. For constipation, cleansing enemas are given, with pronounced flatulence in bedridden patients is recommended to introduce a gas outlet tube. Medicines must be dispensed in strict accordance with doctor's instructions. It is necessary to carefully monitor the implementation recommendations for the regimen, nutrition and therapy of the patient.

Nursing care for patients with heart defects. The care of patients with heart defects depends on the type of defect, the degree of compensation, the underlying disease that caused the development of the defect. Nutrition of patients in the stage of compensation of cardiac activity is carried out according to the same rules as the nutrition of

healthy people (table number 15). In the decompensate state, power is supplied according to the general principles of nutrition of patients with heart failure (see. Chronic heart failure).⁹ Oxygen therapy is indicated for patients, therefore, with compensated vices require regular walks in the fresh air, with decompensate - oxygen therapy. Caring for patients with decompensate defects located on bed rest, the same as in chronic cardiac failure. Nursing care for chronic circulatory failure. It is recommended to provide conditions for prolonged and a full night's sleep (at least 8-10 hours), during I rest eliminate everything possible irritants (not talking in the room where the patient is resting, do not listen to music). A one- or two-hour day's rest is helpful. The patient should be in a clean, ventilated room. Patients with the first and second stages of CNA after discharge from the hospital no regimen restrictions required, with a third stage recommended home mode, and with the progression of manifestations of HNK - bed mode. ten Meals are provided depending on the degree severity HNK: at stages 1 and 2A - table number 10, at stages 2B and 3 - table number 10 a. Table No. 10 provides for the limitation of table salt to 3-5 g per day, some reduction in calorie intake, restriction of consumption free liquid (up to 800 ml per day). Products are prohibited, tonic (natural coffee, strong tea, cocoa, spices), as well as smoked, pickled, fried foods, strong meat and fish broths, lard, lamb and beef fats, products and drinks that can cause flatulence (cabbage, legumes, carbonated the drinks). You should increase your intake of vegetables, berries and fruits, as they increase the vitamin content of the diet. Also, a number of fruits (dried apricots, raisins, apricots, figs, bananas) contain large amount potassium, useful for such patients. You need to eat 4-5 times a day. In small portions, the last meal should be no later than 3 hours before sleep. Table number 10 provides for a further reduction in the load on cardiovascular system, stimulation of urination. Compared to table number 10 in it is even more limited to the use of proteins, fat, carbohydrates, and the calorie content of the diet decreases. The amount consumed fluid is reduced to 500-600 ml per day. Table salt is not added during cooking and not dispensed for salting. Food served to the patient in a wiped or crushed form. Products boiled or steamed, less often baked. Food should be frequent (6 times a day) and in small portions. In some cases (by to the doctor's prescription), patients are shown a special potassium diet, stimulating urination. When prescribing this diet in the diet the patient includes the following products: veal, wheat dishes, oatmeal, barley grouts, milk, cottage cheese, vegetable oil, cabbage, potatoes, peaches, apricots, raisins, dried apricots, bananas, tangerines, rose hips. Exercise therapy is used only as directed by a doctor.

At stage 2A, therapeutic exercises, exercises are indicated. Performed from a sitting and lying position, slow pace, and allowed combination of active and passive exercises, their alternation with breathing exercises, Exercise therapy can be combined with massage of the lower limbs. In stage 2B, exercises are performed in the initial lying position, performed at a slow pace, alternating with respiratory exercises. No massage is prescribed. The third stage of HNC is a contraindication for exercise therapy and massage. Caring for a patient with the third stage of CBC, who is on bed mode: 1) the bed should be soft and comfortable, it should be regularly change bed linen, make sure that the sheet does not form folds. The patient is placed with a raised headrest and pillows placed under the head and under the back (in this position breathing is easier); it is necessary to change the position of the patient in beds; 2) prevention of pressure ulcers (placing under the sacrum, elbows, heels, nape of rubber circles, sandbags, daily rubbing the same areas with vodka or camphor alcohol); 3) you need to monitor the cleanliness of the mouth, ears, eyes, nose; 4) with swelling of the legs, the skin becomes dry and at the slightest irritation wounds and ulcers form on it, which quickly become infected and do not heal. To prevent such complications, it is recommended to regularly lubricate dry skin of the feet with petroleum jelly, sprinkle with severe edema baby talc or starch; 5) with constipation, patients are given cleansing enemas, with flatulence - gas pipes.

Thus, we can conclude that each cardiovascular the disease is specific and if the means of prevention are similar enough for all diseases: this is primarily an active lifestyle, physical exercise, hardening, etc., then every patient needs individual nursing care.

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