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# Ischemic Heart Diseases Interventional cardiology

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### Abstract

Ischemic heart disease is a disease of the heart triggered by decreased Oxygen allocation to the myocardium (muscle of the heart). It is mainly instigated due to blockage of arteries by the accumulation of cholesterol on walls. Ischemia is the phrase used to define "reduced blood supply". Coronary arteries supply blood to heart muscle, blockage of coronary artery may start to decrease in the blood supply to heart. Whether or not there will be primarily swift brutal narrowing of the or closure of either the large coronary arteries or coronary artery finish branches by debris showing downstream in the blood flow. More Than A Few clinical trials have documented the benefits of revascularization in patients with acute ischemic syndromes as well as the efficacy of medical therapy.

Ways to lessen Ischemic heart disease risk include eating a healthy diet, regularly exercising, maintaining a healthy weight, and not smoking. Medications for diabetes, high cholesterol, or high blood pressure are sometimes used. There is limited evidence for screening people who are at low risk and do not have symptoms. Treatment involves the same measures as prevention. Additional medications such as antiplatelets (including aspirin), beta blockers, or nitroglycerin may be recommended. Procedures such as percutaneous coronary intervention (PCI) or coronary artery bypass surgery (CABG) may be used in severe disease. In those with balanced Ischemic heart disease it is ambiguous if PCI or CABG in addition to the other treatments enhances life expectancy or decreases heart attack risk.

Most of the ischemic heart disease caused by atherosclerosis

**Keywords:** Coronary artery; Coronary artery bypass surgery; Acute ischemic syndromes; Atherosclerosis

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### Symptoms

Signs and symptoms of ischemic cardiomyopathy incorporate sudden fatigue, shortness of breath, dizziness, and palpitations. The narrowing of coronary arteries reduces the supply of oxygen-rich blood flowing to the heart, which becomes more pronounced during strenuous activities during which the heart beats faster. For some, this causes severe symptoms while others experience no symptoms at all.

The extremely common symptom is chest pain or discomfort that occurs regularly with activity, after eating, or at other

predictable times; this phenomenon is termed stable angina and is associated with narrowing of the arteries of the heart. Angina also includes chest tightness, heaviness, pressure, numbness, fullness, or squeezing. Angina that changes in intensity, character or frequency is characterized unstable. Unstable angina may precede myocardial infarction. In adults who go to the emergency department with an unclear trigger of pain, almost 30% have pain due to coronary artery disease. Angina, shortness of breath, sweating, nausea or vomiting, and light headedness are signs of a heart attack, or myocardial infection, and immediate emergency medical services are crucial.

Ischemic heart disease has several well determined risk factors. These include high blood pressure, smoking, diabetes, lack of exercise, obesity, high blood cholesterol, poor diet, depression, family history, and excessive alcohol. About half of cases are linked to genetics. Smoking and obesity are correlated with about 36% and 20% of cases, respectively. Smoking just one cigarette per day about doubles the risk of CAD. Lack of exercise has been linked to 7-12% of cases.

Exposure to the herbicide Agent Orange may boost threat. Rheumatologic diseases such as rheumatoid arthritis, systemic lupus erythematosus, psoriasis, and psoriatic arthritis are unbiased risk factors as well.

## Diagnosis

Electrocardiogram, Echocardiogram, Exercise stress test, Angiogram, Cardiac CT Scan.