

## **CARDIAC ISCHEMIA. ANGINA NURSING DIAGNOSIS AND CARE**

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**Annotation:** The causes, principles of diagnosis, prevention and treatment of coronary heart disease (CHD) and angina pectoris are outlined. The main components of nursing care for ischemic heart disease and angina pectoris are presented.

**Key words:** coronary heart disease, angina pectoris, diagnosis, prevention, treatment, nursing care.

Angina Angina (angina pectoris) is a clinical syndrome manifested by a feeling of discomfort or pain in the chest, the development of which is associated with transient myocardial ischemia due to a discrepancy between the myocardial oxygen demand and its delivery through the coronary arteries. This situation occurs when the lumen of the coronary arteries narrows by 50–70%.

The nurse conducts an initial examination of a patient with suspected angina, which includes a thorough analysis of complaints, primarily chest pain, collection of anamnestic data, identification of risk factors for the development of coronary artery disease, and physical examination.

The nurse should be interested in the following facts from the patient's life: chest pain and increased blood pressure in previous years; the presence of cardiovascular diseases, diabetes, bad habits (smoking), chronic stressful situations at home and at work; eating disorders (overeating) and lack of physical activity. The nurse analyzes the nature of the pain attack, which remains the basis for identifying angina.

Physical examination in the diagnosis of this disease is inferior in significance (value) to the analysis of subjective manifestations (complaints) in combination with anamnestic data. During an attack of angina, pale and moist skin, rapid pulse and increased blood pressure, weakened heart sounds and systolic murmur when listening to the heart are often detected.

Upon examination you can find:

- signs of lipid metabolism disorders;
- when examining the eyes - xanthelasmias (from the Greek: yellow, flat) slightly raised plaques that form symmetrically, most often around the eyelids, sometimes on the skin of the ears and the lipoid arch of the cornea (marginal opacification of the cornea);

when examining the skin – xanthomas (from the Greek: yellow), usually in the knee and elbow areas; on the extensor tendons of the hands and feet, especially the Achilles tendon;

- signs of heart failure: shortness of breath, cyanosis, swelling of the veins of the neck, moist rales in the lower parts of the lungs, edema with the appearance of a pit when pressing in the area of the ankles and legs, sometimes on the sacrum (when the patient is in a horizontal position); pathological pulsation in the heart area (aneurysm).

In a comprehensive solution to the patient's main problems (chest pain, shortness of breath and palpitations during physical activity, impaired need to work and move, poor sleep, restlessness and anxiety, fear of death, lack of knowledge about one's disease, uncertainty about a favorable outcome, change in social status and etc.) the nurse plays a significant role.

Activities carried out by a nurse in the process of caring for a patient with angina pectoris:

- early recognition and subsequent control of chest pain;
- training the patient and his family in methods of care (self-care);
- familiarizing the patient and his relatives with the causes and factors for the development of coronary heart disease, the principles of its prevention and treatment, and providing first aid during an attack of angina pectoris;
- ensuring a calm and friendly environment in the ward and at home, eliminating psycho-emotional stress;
- organization of a correct regimen with reasonable limitation of physical activity, sufficient rest and sleep;
- normalization of sleep;
- constant monitoring of the patient's general condition, pulse (frequency, rhythm), blood pressure and body weight;
- fulfilling doctor's orders regarding diet therapy and drug treatment of coronary artery disease, identifying the negative effects of medications.

The main problems of the patient with angina pectoris are:

1. Periodically occurring chest pain
2. Limiting physical activity
3. The need to diet
4. The need to constantly take medications
5. Risk of disability
6. Risk of developing myocardial infarction
7. Risk of sudden death

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