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THE PROBLEM OF PREDICTION AND PREVENTION
OF SUDDEN CARDIAC DEATH

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The importance of this topic is first of all determined by the high incidence of sudden cardiac deaths (SCD). Cases of sudden death make about 70% of the number of all deaths from coronary heart disease. The second issue of this problem is the fact that the majority of suddenly died patients didn't have any severe, not compatible to life organic changes of the heart. The considerable part of patients with sudden heart failure can be successfully reanimated if immediate medical help is rendered. The investigation of sudden cardiac death preventive means is considered to be very perspective.

Research objective: the identification of the reasons and mechanisms of sudden cardiac death development, allocation of risk groups, development of sudden death preventive measures and improvement of first medical aid in case of sudden arrest of blood circulation.

Research technique: The review of all the cases of nontraumatic sudden cardiac deaths in people 30-50 years of age during 2007, 2012, 2013 years has been carried out. The group of people who suddenly died from accurate heart failure has been allocated, the data on the place, time, circumstances of death, constitutional features of victims, the condition of cardiovascular system and other accompanying pathologies have been systematized.

Research materials: medical protocols of examining corpses of people died from a sudden blood circulation arrest aged from 30 to 50 years during 2007, 2012, 2013 years. The research was conducted on the basis of the Department of General Examinations № 3 of State Service of Justicial Medical Examinations.

Results: According to the obtained data the nosological forms that can result in sudden cardiac death are: coronary heart disease (69%), hypertrophic cardiomyopathy (11%), dilated cardiomyopathy (20%). The factors, allowing to allocate groups of people with the high risk of sudden death (male gender, the excess body weight, hypertrophy of the left ventricle as a result of arterial hypertension, alcohol intoxication) have been revealed. In 98% of cases reanimation wasn't held because of the occurrence of biological death before the ambulance arrival. In this regard special attention should be paid first of all to sudden cardiac death preventive measures (complex studying of criteria for drawing up SCD risk stratification, decreasing risk of coronary heart disease development, ingrafting cardioverter-defibrillator).