Some mechanisms of efficacy pathogenetic kardiolin in patients with coronary artery disease with concomitant pathology of diabetes

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The paper studied the basic pathogenic mechanisms in the development of coronary heart disease and type 2 diabetes, defined the common aspects of the etiology and clinical manifestations of similarities. The main pathophysiological characteristics and causes of coronary heart disease when accompanied by type 2 diabetes. Based on specific data pathogenesis expediency kardiolini use as auxiliary phytotherapeutic drug in patients with coronary artery disease with co-morbidities of diabetes. Also, the influence of the main components of the drug on humans. Kardiolini – complex herbal preparation, which is characterized sedation, isotropic positive and negative chronotropic effect, improve cerebral and coronary blood flow, preventing thrombosis, lowering lipids, cholesterol and triglyceride blood, that the impact on common pathogenic mechanisms of coronary heart disease and type 2 diabetes.

Keywords: coronary heart disease, insulini resistance, type 2 diabetes, atherosclerosis, kardiolin.

Formulation of the problem. Coronary heart disease (CHD) in accordance with the Guidelines of the Ukrainian Association of Cardiology is a major health and social problem today. Despite sufficient progress in the study of pathogenesis, clinical manifestations, diagnosis and treatment of coronary artery disease is the most common severe cardiovascular disease with multiple complications, both in Ukraine and throughout the world. In the US, the results of epidemiological studies of adults, the prevalence of CHD is 7.3%, in Russia – 7%, in Ukraine – 10% (by IV Navchukom, 2012). The structure of causes of death in cardiovascular disease CHD share in 2015 was 68.9%, which is above the world average, which is 45% (by V. Covalence, 2016). In Chernivtsi region CHD prevalence from 2008 to 2012 increased by 17.1% and disease – by 14.2% (by AS Biduchakom, 2013) [3]. The problem of the treatment and rehabilitation of patients with coronary heart disease is that they have a number of associated diseases that can not be ignored in the selection of treatment regimens and physical therapy programs. Nowadays more and more violations ascertained combination of CHD with endocrine disorders.

Analysis of recent research. Throughout the world a growing number of patients with type 2 diabetes. According to the International Diabetes Federation, the number of diabetic patients in the world’s adult population is about 382 million, and by 2035 will be about 592 million. The pathology of the cardiovascular system is available in more than half of patients with type 2 diabetes, and according to some authors its prevalence reaches 90-100%. In particular, coronary heart disease occurs in 50-70% of patients with diabetes mellitus (DM). These atherosclerotic vascular changes occur in patients with diabetes for 8-10 years earlier than the general population, even in the absence of classic risk factors such as hypertension, smoking, and hyperlipidemia. This indicates the presence of specific, associated with diabetes risk factors that require deeper study and adequate correction. Therefore, timely diagnosis and effective treatment of CHD patients with concomitant diabetes is closely linked to the definition of pathogenic factors and the search for new treatment regimens.

Early disability and high mortality due to the development of cardiovascular complications can be considered as type 2 diabetes, cardiovascular disease (American Heart Association) [15]. Type 2 diabetes is characterized by accelerated development of atherosclerosis and coronary heart disease due to the presence in these patients of diabetic dyslipidemia (increased cholesterol low density lipoprotein (LDL), triglycerides (TG), lower HDL cholesterol (HDL cholesterol)), hyperinsulinemia, hyperglycemia, activation of systemic inflammation, systemic oxidative stress [6].

Outstanding job. It is advisable to note that the pathogenesis of vascular complications of diabetes rather complex and not fully understood. Until recently, the pathophysiological processes leading to CHD considered primarily from the perspective of neurohumoral hypothesis, based on overexpression of neurohormones are initiating remodeling and progressive dysfunction of the left ventricle. In recent years, has become common hypothesis «common ground» («common-soil» hypothesis), according to which a close correlation between type 2 diabetes and coronary heart disease is determined that they have a common origin, that is «common ground». The hypothesis suggests that IBS is not
just a consequence of type 2 diabetes, but Type 2 diabetes and cardiovascular diseases have a single entity pathophysiology.

The purpose of the work. Currently, there is evidence of etiological role of inflammation, epithelial dysfunction, oxidative stress in the pathogenesis of insulin resistance and type 2 diabetes [4]. This concept not only gives rise to a new paradigm of understanding diabetic atherosclerosis, but has implications for prevention and treatment. Therapeutic strategies directed to reduce endothelial dysfunction and chronic inflammation, make it possible to prevent and treat both type 2 diabetes and coronary artery disease [5].

Research results. Patients with type 2 diabetes often have multiple diffuse coronary artery disease, reduced vasodilator reserve, decreased fibrinolytic activity, increased platelet aggregation ability and diabetic cardiomyopathy. Usually there are classic symptoms of angina in patients with type 2 diabetes already expressed in the presence of coronary system. Previously, most patients IBS occurs in such silent myocardial ischemia or manifested by nonspecific symptoms such as fatigue, breathlessness attacks, arrhythmia. Diabetic autonomic neuropathy and early de-symptatziya infarction leads to high prevalence of silent and atypical variants course of CHD with type 2 diabetes [9]. It is therefore important to early diagnosis of coronary artery disease type 2 diabetes immediately after the first symptoms, which provides for adequate treatment and prevention of disease progression.

Established that diabetes and coronary heart disease have a number of common risk factors, including excessive consumption of fatty and high-calorie foods, sedentary lifestyle, obesity, high cholesterol and more. There are works which show the presence of correlation between the levels of lipids in the blood serum and the presence of atherosclerosis of the main vessels [7, 8]. In patients with endocrine disorders as well as with IBS appear psychosomatic disorders. Patients with diabetes irritable, picky, conflict, distrustful; in which there is emotional lability, tearfulness, dysphoria, increased irritability and anxiety [12].

Existing medicines at IBS mainly aimed at increasing coronary blood flow and decrease myocardial oxygen demand. Often medical therapy accompanied by complications caused by side effects of medications. Recently, growing interest in folk medicine, due to a number of benefits before prescribing herbal synthetic drugs. In plants used by traditional medicine, contains a complex of natural vitamins, macro- and microelements in optimal combinations [13]. When choosing drugs in the treatment of dual pathology promising area is the use of herbal drugs, which are usually basic ability to optimize pharmacotherapy and characterized by a mild effect on damaged organs [1]. Herbal medicine allows for a comprehensive approach to the treatment of patients with concomitant coronary heart disease with type 2 diabetes, to conduct effective secondary prevention. A principle of pathogenesis therapy of coronary heart disease is to apply koronarorozshyryuyuchny, protyaterosklerotycnych, anesthesics, and drugs that improve myocardial oxygen demand and delivery of nutrients [10]. The number of plant koronarolitykiv relatively small. They are used in the early stages of the disease and they efficiently prevent spastic bouts of illness. In developing rational approaches to medical rehabilitation for patients with type 2 diabetes on the background of CHD our attention was drawn kardiolini — complex herbal preparation, which is characterized sedation, positive isotropic and negative chronotropic effect, improve cerebral and coronary blood flow, preventing thrombosis, lowering lipids, cholesterol and triglyceride levels.

The composition 1 ml of drops contains: tincture of medicinal plants (1: 12.5), Adonis herb ordinary, normal fruit juniper, arnica, mint leaves.

In normal grass Adonis (Herba adonidis vulgaris) found 0,13-0,83% of cardiac glycosides. The largest number of them contained in the leaves. Total spring Adonis contains 25 individual cardiac glycosides. In the aerial part of the plant found strophantine K-beta and tsymaryn and specific kardenoloid Adonis adonitoksin which is hydrolyzed to adonitoksiheninu and L-rhamnose. In the grass contains glycosides and 2.6 dymetoksyshynnon, phytoesterols, flavonoids (0,59-1,25%), steroids (6-9,4%), glycoside adoniver, ascorbic acid (33,4-49,2 mg %), carotene, choline, adonit (4%), coumarone and organic acids. [2] The normal grass Adonis has cardiotonic action, normalizes heart rhythms (slow), extends diastole, systole increases, increases stroke volume of blood, moderately slows intracardiac conduction. The nature of glycosides Adonis spring close to the plant digitalis glycosides poisonous, but compared with digitalis drugs in the body do not accumulate, but less active and much less stable and provide less prolonged action.

Peppermint leaves (Folia Menthes piperitae) containing 1-3% efirnoy butter in there by up to 50% menthol, menthol esters 4-11%, 7-25% Menton Maintenon piperyton, pineol, Menten, felandren alha-pinen, limonene, pulseon and other terpenes, acetic, and other izovalerianovu vilni acid, 5-10% mentofuranu. Raw contains 3,5-12% tannins, bitter substances, and its nikotynovu acid amide, cofe and chromogenic acids, carotenoids, flavonovi hlikozydy. Peppermint causes irritation of the nerve endings, stimulating cold receptors. In response, the surface blood vessels constrict, and internal expand. The effects — reduce or eliminate pain. Peppermint leaves have beneficial properties, regulates arterial and venous circulation, prevents increased intracranial pressure and redirects blood flow to the external veins. Had choler etic effect of active excretion of cholesterol and holativ, strengthens antitoxic liver function, relieves spasms and normalizes metabolism. The leaves of peppermint extracts taken as insomnia, hysteria and neuralgia; appointed in cardiology practice as cardiac stimulant (part of validoli), to improve blood circulation and as atherosclerotic agent.

The fruits of juniper ordinary (Furcates Juniper) contain essential oil (0.5-1.5%) of the composition: alpha-pinene, kadyken, borneol, yuniperol, terpineol, camphene, yunen, alpha terpenes, felandren, dependent, Sabine, tsyrdol, juniper camphor and other terpene derivatives. Containing more invert sugar (30%), bitter glycoside yuniperyn, flavones glycosides, dyestuffs, pectin, organic acids,
References:


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ДЕЯКІ МЕХАНІЗМИ ПАТОГЕНЕТИЧНОЇ ЄФЕКТИВНОСТІ КАРДІОЛИНУ У ХВОРИХ НА ЗАХВОРЮВАННЯ КОРОНАРНИХ АРТЕРІЙ У ПАЦІЄНТІВ З ЦУКРОВИМ ДІАБЕТОМ II ТИПУ

Анотація
У статті вивчались основні патогенні механізми розвитку ішемічної хвороби серця і діабету 2 типу, визначалися загальні аспекти етіології та клінічні прозив подібності. Основні патофізіологічні особливості і причини ішемічної хвороби серця, що супроводжуються діабетом 2 типу. Грунтується на конкретних даних про доцільність патогенезу Кардіолін використовують в якості допоміжного фітотерапевтичного препарату у пацієнтів з ішемічною хворобою серця із супутніми захворюваннями цукрового діабету. Крім того, вплив основних компонентів препарату на людину. Kardiolini – комплексний трав’яний препарат, який характеризується седацією, ізотропним позитивним и негативним хронотропним ефектом, покращує церебральний і коронарний кровотік, запобігає тромбозу, знижує рівень ліпідів, холестерину і тригліцеридів крові, що впливає на загальні патогенні механізми ішемічної хвороби серця і цукровий діабет.

Ключові слова: ішемічна хвороба серця, резистентність до інсуліну, цукровий діабет типу II, атеросклероз, кардіолін.