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**PREVENTION OF VASCULAR DEMENTIA IN THE ELDERLY
PATIENTS**

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Vascular dementia is violation of cognitive function in elderly people as a result of small cerebral infarcts on the background of hypertension. Cognitive impairments are manifested by a decrease memory for current events, a decrease concentration of attention, slowing of thinking, narrowing of the circle of interests. Cognitive impairments may be moderate, but may reach a degree of dementia. Cognitive impairments is often accompanied by behavioral disorders (irritability, aggressiveness) and affective impairments (anxiety, depression). Cognitive impairments is a significant factor of disease prognosis, the effectiveness of treatment and rehabilitation. They determine the dynamics of the quality of life and social adaptation of patients.

Cognitive impairments observed in many neurological and mental disorders, complicate the course of the underlying disease and lead to desocialization of the patient. In the early stages of development cognitive impairments, as a rule, are well amenable to correction. Therefore, timely therapy aimed at improving cognitive function will provide an opportunity to improve the course of the underlying disease and avoid serious problems.

Factors that contribute to the emergence of dementia are divided into socio-demographic and medical. Socio-demographic factors include age, male gender, genetic predisposition, low education level, Negroid or Asian race, alcohol abuse, physical and intellectual passivity. The medical factors include arterial hypertension, diabetes mellitus, atrial fibrillation, heart failure, a previous stroke.

Arterial hypertension is the most important factor in the development and progression of dementia, special vascular dementia (VD). Among the indices blood pressure for the development of (VD), the most important are the level of systolic blood pressure and circadian rhythm. Prolonged and improperly treated arterial hypertension is the reason for not only functional, but also structural changes in cerebral vessels. On the background of atherothrombotic processes multiple slight infarcts often occur, which are one of the main causes of cognitive impairment in patients with arterial hypertension.

Primary and secondary prevention of VD is correct risk factors for atherogenesis, such as atherogenic dyslipidemia, arterial hypertension, diabetes mellitus, obesity. Prevention of low-activity lifestyle is great importance. Also use constant training (reading, learning languages).

Angioprotective antihypertensive therapy is the main means of reducing acute and chronic cerebrovascular complication. Decrease of blood pressure

level by 5 – 10 mm Hg.Art. reduces the frequency of atherothrombotic events and prevent the development of cognitive dysfunction. According to the recommendations of the European Society of Cardiology and European Society for the Study of Hypertension the blood pressure level should be less 140|90 mm Hg.Art. In elderly patients maintenance of BP figures at 140|80 mm Hg.Art. makes enable to avoid the progression of mental and motor impairment. It has been proved that the use of a combination of ACE inhibitors and a diuretic reduces the severity of some types of cognitive function.

Integrated approach to secondary prevention of VD requires the administer of antihypertensive therapy (combination of blockers of the rennin-angiotensin-aldosterone system and calcium channels), antiplatelet drugs (aspirin, curantil, clopidogrel), in frequent paroxysms of atrial fibrillation – varfarin. Also use statins, neurometabolic drugs (nootropics, angioprotectors, drugs that improve microcirculation).

Also for treatment of cognitive dysfunction administer inhibitors of acetyl cholinesterase (galantamine, rivastigmine), antioxidants (vitamin E, cytoflavin), antagonists of the NMDA receptors (memantine), drugs of other groups (neuropeptides, cytocalin, sermion, extract of ginkgo biloba, pyracetam, nimodipine, vinkamine).

So the main task of the doctor is early diagnostics and correction changes that can lead to expressed cognitive function.

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PREVENTION OF CEREBROVASCULAR DISEASES IN THE
FAMILY DOCTOR PRACTICE

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The problem of cerebrovascular disorders is one of the most urgent in modern clinical medicine, because they often develop, have a high percentage of disability and mortality. Therefore, the task of increasing the effectiveness of treatment and prevention of cerebrovascular diseases has an important socio-economic significance.

Chronic disorders of cerebral circulation (CDCC) occupy a leading place among various forms of cerebrovascular pathology. CDCC is a long-term condition requiring the family doctor to determine long-term goals and stages of treatment that would be understandable to the patient and his relatives. As the process of treatment often requires their conscious participation. During treatment, acute conditions may arise, and the doctor must teach the patient when he needs emergency care. The doctor should understand what is the main thing in the treatment of the patient and be able to explain to him and relatives.