

MANAGEMENT OF HEART FAILURE – A CHALLENGE FOR THE TWENTY-FIRST CENTURY

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Introduction. Heart failure is a clinical syndrome caused by structural and functional defects in the myocardium resulting in impairment of ventricular filling or the ejection of blood. Over the past decades, the effectiveness of heart failure care has been markedly improved by the implementation of drug and device therapies with proven impact on mortality and morbidity but also by the development of advanced strategies for disease management in the outpatient setting.

The aim of our research was to highlight the social and economic impact of heart failure on the healthcare system.

Material and methods. A critical analysis of scientific articles published during 2018-2022 in PubMed, Medscape, Elsevier, and Hinari databases was done, using the following search words – heart failure, morbidity, disease, management, treatment, and prevention.

Results. Heart failure is considered an epidemic disease in the modern world affecting approximately 2% of the adult population and remaining the leading cause of morbidity and mortality globally. Heart failure is a highly symptomatic syndrome that affects 2–3% of the population in industrialized countries with a marked rise in those aged >65. It has been estimated that ~15 million Europeans and 5.8 million US Americans suffer from heart failure. During the COVID-19 pandemic, socioeconomic deprivation, social isolation, and reduced physical activity triggered the enhancement in heart failure development and caused more severe complications. The most common cause of heart failure is reduced left ventricular myocardial function; however, dysfunction of the pericardium, myocardium, endocardium, heart valves, or main vessels alone or in combination is also associated with heart failure. The major goals of treatment in heart failure are to improve prognosis, reduce mortality, alleviate symptoms, and reduce morbidity by reversing or slowing cardiac and peripheral dysfunction. Standardized medical therapy has been successful in the early stages of heart failure. Advanced stages of heart failure require frequent hospitalization due to the severity of clinical symptoms or associated comorbid conditions, which require strict implementation of an appropriately individualized multidisciplinary approach and quality measures to reduce readmissions. Heart failure markedly affects the patient's quality of life. Fear, anxiety, and depression are common. Epidemiologic studies suggest that, by focusing on a few clear prevention targets, it is possible to greatly reduce the suffering and economic costs resulting from heart failure.

Conclusions. Heart failure indeed is a complex disease and so far has been a major cause of morbidity and mortality in developing and developed countries. The prevention of heart failure is an urgent problem of public healthcare that requires national and global implications.