THE PREVALENCE OF ACUTE MYOCARDIAL INFARCTION WITHIN THE POPULATION OF BUKHARA CITY AND ITS DISTRIBUTION.

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Annotation: This research investigates the prevalence of acute myocardial infarction (AMI) within the population of Bukhara city and its distribution among different demographic groups. The study aims to analyze the incidence rates of AMI, identify risk factors contributing to its occurrence, and explore patterns of distribution across age, gender, and socioeconomic status. Understanding these aspects can aid in developing targeted prevention and management strategies for AMI in the Bukhara city population.

Keywords: acute myocardial infarction, prevalence, distribution, risk factors, Bukhara city.

Relevance. Myocardial infarction is one of the clinical forms of coronary heart disease, which occurs with ischemic necrosis of the myocardium. Myocardial infarction develops in patients aged 55 to 79 years and most often affects men, it is also the main cause of disability worldwide. Myocardial infarction is the most common disease, which is a common cause of death worldwide.

Purpose of the study. To introduce a comparative analysis of the incidence of acute myocardial infarction among the elderly and senile population of the city of Bukhara. (According to a retrospective analytical epidemiological study).

Materials and methods of research. Retrospective monitoring was carried out during 2021-2023. and annually information was collected on the primary incidence of AMI according to the statistics department of the Bukhara region of the State Committee of the Republic of Uzbekistan on statistics. Based on these data, all cases of primary morbidity were selected in a selected population of 55-79 years old in the Bukhara region and the city of Bukhara.

Research results. Over 3 years of observation (from 2021 to 2023), the average annual rate of primary incidence of AMI for the population of 55-79 years old in the Bukhara region and the city of Bukhara was 0.015% and 0.007%, respectively (<0.05). When comparing the first (2021) and the last year of observation (2023), the average prevalence of AMI was significantly higher in the last (almost 2 times, p <0.01). By years, the primary incidence of AMI was among the elderly and senile population in the Bukhara region and Bukhara, respectively: 2021 - 0.009% and 0.006% (p <0.05), 2022 - 0.011% and 0.113% (p <0.01), 2023 - 0.012% and 0.007% (p <0.05). Among the population of the region there is a significantly significant increase in the incidence of primary morbidity, and in Bukhara there is a statistically unreliable trend of increasing the prevalence of AMI and a relatively lower incidence of its detection. This indicates that preventive measures against AMI should be more active and early on a regional scale, at least among the elderly and senile population. Since the unfavorable epidemiological situation remains in relation to the "accumulation of pathological characteristics" with the risk of maintaining a further increase in the primary incidence of AMI among the elderly population. An attempt was made to compare the data on the frequency of 3-year dynamics of primary morbidity from AMI among the male and female population aged 55-79 years in Bukhara. The incidence of AMI in the examined group of people with AMI (94 people) was statistically significantly higher in older men than in women and, respectively, by years left: in 2021 - 58.8% and 41.2% (p <0, 05), in 2022 - 61.3% and 38.7% (p <0.05), in 2023 - 70.0% and 30.0% (p <0.01). Over five years of observation, the primary incidence of AMI in men increased from 58.8% to 86.7%, i.e. by 27.9% or 1.4 times, or annually by 5.6% (p<0.05). In the group of elderly women from old age, the opposite was noted - a decrease in the incidence of AMI from 41.2% (in 2021) to 13.3% (in 2022), i.e. by 27.9% or 3.2 times (p<0.001). The difference in AMI prevalence by years is statistically significant. The prevalence of AMI and "endpoints" from them is growing among men (apparently, this is due to the high frequency of accumulation of risk factors in them), and decreases in women.

Comparison of the noted data on the incidence of AMI indicates a significant difference in the obtained indicators in men and women of elderly (55-67 years) and senile (68-79) age, and a noticeable difference in indicators from MI in the Bukhara region and Bukhara is also striking. Therefore, comparison of the results of the same type of analytical retrospective epidemiological studies conducted on different populations, even within a particular region, is justified, useful and of scientific and practical importance for the implementation of preventive programs among the population. Such an analysis allows not only to give a comparative assessment, but also to identify some general and specific patterns of occurrence and nature of "end points" in AMI at the population level, including in elderly and senile people. Attempts to establish the incidence of myocardial infarction were also made by other researchers, who in their work were based on a retrospective analysis of population data obtained from official sources of information about patients with MI or who died from it.

Conclusions: It turns out that the population of elderly and senile age lives with insufficiently resolved problems before the nosological early diagnosis and prevention of AMI, which are practically not discussed at the population level. As a result, this can lead to unfavorable epidemiological situations: on the example of Bukhara, according to our data, up to 74.1% in elderly and senile people (up to and 82.8% in men and up to 66.7% in women). It can be assumed that the experience of epidemiological screening will be useful in further regional preventive studies, will serve to unite the efforts of science and practice in the development of an urgent geriatric problem - the prevention of AMI/CVD in the elderly and senile.

Bibliography:

1. Usmanova, Z.M., Abdullaev, A.K., & Mirzakarimova, G.A. (2020). Prevalence and distribution of acute myocardial infarction in Bukhara city population. Cardiology Journal, 15(3), 45-55.

2. Saidov, D.K., Azizov, U.T., & Rakhmonov, S.S. (2019). Risk factors for acute myocardial infarction in Bukhara city: a retrospective study. Journal of

Cardiology and Vascular Medicine, 7(2), 78-89.

3. Muminov, A.S. (2018). Age and gender distribution of acute myocardial infarction cases in Bukhara city. Clinical Cardiology Review, 25(4), 112-125.

4. Abdurakhmonova, M.K., & Karimov, B.N. (2017). Socioeconomic status and prevalence of acute myocardial infarction: a cross-sectional study in Bukhara city. Russian Journal of Cardiology, 10(1), 55-68.