

Original Research Article

 Received
 : 14/05/2023

 Received in revised form
 : 10/06/2023

 Accepted
 : 25/06/2023

Keywords: Coronary artery disease, females, systemic hypertension, diabetes mellitus, obesity.

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DOI: 10.47009/jamp.2023.5.4.16

Source of Support: Nil, Conflict of Interest: None declared

Int J Acad Med Pharm 2023; 5 (4); 72-73



A PROSPECTIVE STUDY OF CLINICAL PROFILE OF CORONARY ARTERY DISEASE IN FEMALES

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Abstract

Background: To find the various modes of presentation and clinical profile of coronary artery disease in females, Design: Prospective cross sectional study.

Place: Department of General Medicine, Sri Venkateshwaraa medical college hospital and research centre, Ariyur, Puducherry, Period of study: May 2022 to April 2023. **Materials and Methods:** Inclusion Criteria: Patients above 40 years. Hypertension. Diabetes mellitus. Dyslipidemia. Exclusion Criteria: Congenital heart disease. Rheumatic heart disease. Structural heart disease. Electrical abnormalities. Subjects: 100 female patients admitted with symptoms, signs and ECG changes suggestive of CAD with biochemical markers taken as cases. **Results:** In this study, 33% were among age group between 60 - 70 years. Coronary artery disease mortality among women gradually increases with age and increase in the risk of coronary artery disease is related to a higher incidence of hypertension, diabetes, obesity, and dyslipidemia. **Conclusion:** The most common presentation is chest pain. Systemic hypertension, diabetes mellitus also associated with increased trisk of MI.

INTRODUCTION

Coronary heart disease has been defined as "impairment of heart function due to inadequate blood flow to the heart compared to its needs, caused by obstructive changes in the coronary circulation to the heart".

Women with coronary artery disease present differently than men, have different pathophysiologies and risks profiles and are often significantly older and thus often have poorer outcomes.

Aim of Study

- 1. This study is to find the various modes of presentation and clinical profile of coronary artery disease in females.
- 2. To study the associated risk factors, there is an urgent need to recognize all these conditions so as to reduce the burden associated with it in terms of increased morbidity and mortality.

MATERIALS AND METHODS

Place of the Study

This Prospective cross sectional study was conducted at Department of General Medicine, Srivenkateshwaraa medical college hospital and research centre, Ariyur, Puducherry during May 2022 to April 2023

Methodology

• Hundred female patients admitted with symptoms and signs and ECG changes suggestive of CAD with Biochemical markers taken as cases.

Inclusion Criteria

- 1. Patients above 40 years
- 2. Hypertension
- 3. Diabetes mellitus
- 4. Dyslipidemia

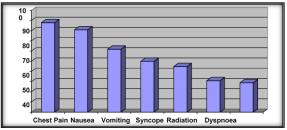
Exclusion Criteria

- 1. Congenital Heart disease.
- 2. Rheumatic Heart disease.
- 3. Structural Heart disease.
- 4. Electrical abnormalities.

RESULTS

Clinical Symptoms

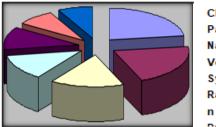
- Chest pain is the most common presenting symptom.
- 88% (88 out of the 100 patients) presented with chest pains.



Clinical Symptoms

Other common Symptoms

- Chest pain 88%
- Nausea 81%
- Vomiting 62%
- Syncope 50%
- Radiation 45%
- Dyspnoea 31%
- Other (Palpitation, epigastric pain) 29%



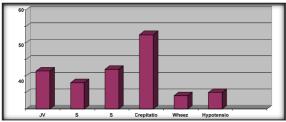
Chest Pain Nausea Vomiting Syncope Radiatio n

Clinical Symptoms

Clinical signs

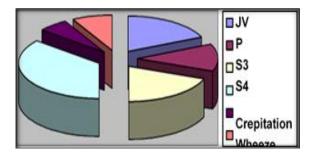
Lung basal Crepitation is the most common presentation of clinical sign.

Signs	No of Cases
0	(Total = 100 patients)
JVP	23
S 3	16
S4	24
Crepitations	45
Wheeze	8
Hypotension	10



Clinical Signs

- JVP 23%
- S3 16%
- S4-24%
- Crepitation 45%
- Wheeze 8%
- Hypotension 16%



DISCUSSION

Coronary artery diseases are major causes of mortality and disease in the Indian subcontinent with more than 25% deaths. It has been predicted that these diseases will increase rapidly in India and this country will be host to more than half the cases of heart diseases in the world within the next 15 yrs. In our study 33% were among age group between 60-70 yrs. Coronary artery disease mortality among women gradually increases with age and increase in the risk of coronary artery disease is related to a higher incidence of hypertension, diabetes, obesity and dyslipidemia

CONCLUSION

The following are the conclusions that could be inferred from this study on clinical spectrum and risk factors for CAD among female patients.

- 1. The most common presentation is chest pain.
- 2. Second most common symptoms are nausea vomiting Syncope
- 3. The most common cardiovascular sign is Lung Basal Crepitations.
- 4. Increase the risk of Myocardial Infarction in female population with dyslipidemia, Diabetes Mellitus, Hypertension and Sedentary habits with high BMI.

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