

Pretilost i kardiovaskularno zdravlje Obesity and cardiovascular health

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Debljina je bolest koja značajno utječe na kardiovaskularni status, pobil i ishod. Već u asimptomatskih pretilih bolesnika susrećemo dobro definirane specifičnosti hemodinamike, odstupanja u nalazima kardiološke obrade te rizični profil koji je značajno nepovoljniji u odnosu na normalno uhranjene osobe iste dobi i spola. Debele osobe češće imaju manifestnu srčanu bolest – u prvom redu ishemijsku bolest srca i kronično srčano zatajivanje, iako su skloniji i razvoju plućne hipertenzije koja upravo upravo u ovih bolesnika ističe specifičnu, multifaktorijsku etiologiju.

Paradoks debljine prema kojem je viši indeks tjelesne mase povezan s boljom prognozom vrijedi samo u uznapredovanim srčanom zatajivanju i dodatno naglašava jedinstven stav da na korekciji pretjerane tjelesne težine valja inzistirati u svim drugim oblicima i fazama popuštanja srca.

Zbog iznimnog utjecaja na razvoj bolesti i klinički tijek, liječenje debljine je neodvojiv dio suvremene primarne i sekundarne kardiovaskularne prevencije te svakodnevnog rutinskog kardiološkog rada.

Obesity is a disease that significantly affects the cardiovascular status, morbidity and outcome. Even in asymptomatic obese patients, there are some well-defined specificity of hemodynamics and typical aberrations in cardiovascular diagnostic measurements. Also, obese patient's risk profile is significantly less favorable when compared to normal weight individuals of the same age and sex. Obese people tend to develop symptomatic heart disease: coronary heart disease, chronic heart failure, and pulmonary hypertension with specific multifactorial etiology.

The obesity paradox underlines the fact that the higher body mass index is associated with improved prognosis only in advanced heart failure. Furthermore, it highlights that the correction of excessive body weight should be mandatory in all other forms and stages of heart failure.

Because of the overwhelming influence of obesity on cardiovascular disease – its development and clinical course, the treatment of obesity became an inseparable part of the modern primary and secondary cardiovascular prevention.

LITERATURE

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