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4. CONSEQUENCES OF PULMONARY HYPERTENSION AND RIGHT-SIDED HEART FAILURE



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Introduction. Pulmonary hypertension (PH) is common in several pathologies and maintains high levels of morbidity and mortality. In PH the main consequence is right heart failure, which leads to complex clinical syndrome affecting several organ systems. The systemic nature of PH and right heart failure is often neglected or underestimated, which ultimately has a negative effect on the patient's condition.

Aim of study. Review the literature targeting the analysis of the correlation between pulmonary hypertension and right heart failure.

Methods and materials. Multivariate study based on a review of the literature over the past 5 years regarding the effects of pulmonary hypertension and right heart failure on different systems and their mutual impact on disease progression.

Results. While the systemic nature of PH and right heart failure is often neglected or underestimated, pulmonary hypertension affects up to one percent of the global population and occurs at an incidence of up to 10% in people over 65 years of age, leading to a poor prognosis for the patient. Thus both systemic venous congestion caused by right ventricular dysfunction and impaired peripheral perfusion caused by right heart/left heart interaction and decreased systemic flow contribute to multiple organ system damage and inter-organ interaction, which can lead to a systemic inflammatory state.

Conclusion. It should be pointed out that a greater part of available evidence on secondary organ damage (especially liver and kidney damage) is mainly related to left heart failure, whereas the consequences of isolated right heart failure caused by PH are understudied.

