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**HEART ATTACK: A COMPARATIVE STUDY OF KYRGYZSTAN AND INDIAN
TREATMENT METHODS**

ЖҮРӨК КРИЗИСИ: КЫРГЫЗСТАН МЕНЕН ИНДИЯНЫН ДАРЫЛОО ЫКМАЛАРЫН
САЛЫШТЫРЫП ИЗИЛДӨӨ

СЕРДЕЧНЫЙ ПРИСТУП: СРАВНИТЕЛЬНОЕ ИССЛЕДОВАНИЕ МЕТОДОВ ЛЕЧЕНИЯ В
КЫРГЫЗСТАНЕ И ИНДИИ

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HEART ATTACK: A COMPARATIVE STUDY OF KYRGYZSTAN AND INDIAN TREATMENT METHODS.

Abstract

Cardiovascular diseases continue to be the leading cause of hospitalization and mortality worldwide, despite advancements in medical technology and treatments (Manckoundia et al., 2017). In particular, the prevalence of cardiovascular diseases is increasing in both developed and developing countries, making them a significant global health concern (Ferdausi et al., 2020). Numerous risk factors contribute to cardiovascular diseases, including hypertension, diabetes, obesity, and smoking.

Keywords: Heart Diseases, Heart Attack, Coronary Artery Disorders, Sudden Death..

Жүрөк кризиси: Кыргызстан менен Индиянын дарылоо ыкмаларын салыштырып изилдөө

Аннотация

Жүрөк-кан тамыр оорулары медициналык технологиядагы жана дарылоодогу жетишкендиктерге карабастан, дүйнө жүзү боюнча ооруканага жаткыруу жана өлүмдүн негизги себеби болуп калууда (Manckoundia et al., 2017). Атап айтканда, жүрөк-кан тамыр ооруларынын таралышы өнүккөн жана өнүгүп келе жаткан өлкөлөрдө да өсүп, аларды олуттуу глобалдык ден-соолукка тынчсыздандырууда (Ferdausi et al., 2020). Көптөгөн тобокелдик факторлор жүрөк-кан тамыр ооруларына, анын ичинде гипертония, диабет, семирүү жана тамеки тартууга өбөлгө түзөт.

Ачкыч сөздөр: Жүрөк оорулары, Инфаркт, коронардык артериялардын бузулушу, күтүлбөгөн өлүм..

Medico-social importance of a healthy lifestyle in shaping the health of students

Abstract

Сердечно-сосудистые заболевания продолжают оставаться основной причиной госпитализации и смертности во всем мире, несмотря на достижения в области медицинских технологий и методов лечения (Manckoundia et al., 2017). В частности, распространенность сердечно-сосудистых заболеваний растет как в развитых, так и в развивающихся странах, что делает их серьезной глобальной проблемой здравоохранения (Ferdausi et al., 2020). Многочисленные факторы риска способствуют сердечно-сосудистым заболеваниям, включая гипертонию, диабет, ожирение и курение.

Ключевые слова: Болезни сердца, сердечный приступ, заболевания коронарных артерий, внезапная смерть.

Introduction

Cardiovascular diseases affect populations globally, their burden can vary across different countries and regions. For instance, a study conducted by the World Health Organization in 2008 found that the prevalence of elevated blood pressure in Indians was 32.5% (Sridhar, 2018), highlighting the significant burden of hypertension in India. Hypertension, or high blood pressure, is a significant risk factor for coronary heart disease and stroke, further exacerbating the burden on the Indian healthcare system.

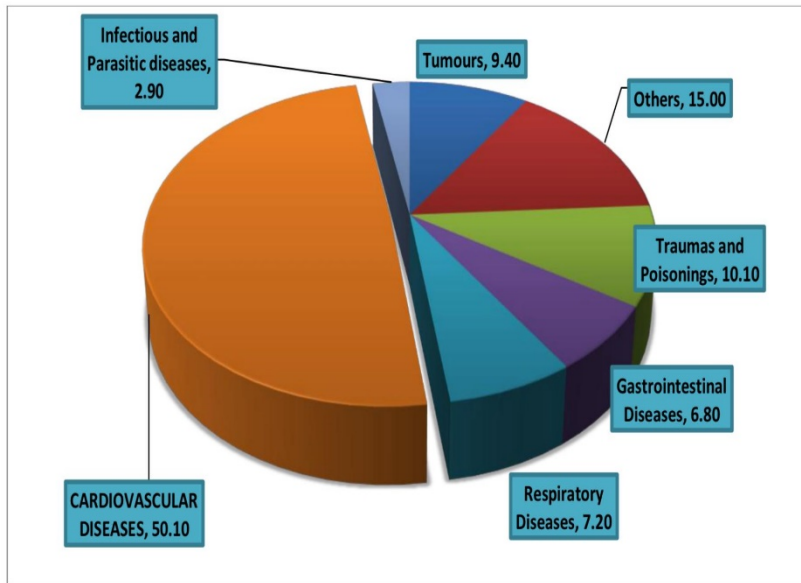


Diagram 1. The Structure of Reasons of Death rate of the Kyrgyz Republic Population

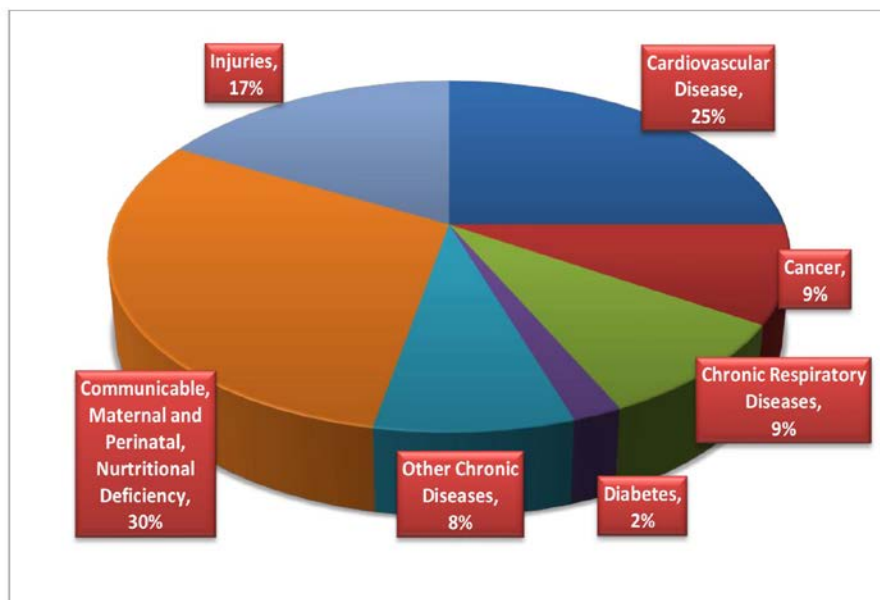


Diagram 2. Estimated Deaths by Cause 30-59 Years, India , 2005

Comparative Overview of Kyrgyzstan and Indian Healthcare Systems

Before delving into the comparative studies on drug treatments for heart attacks in Kyrgyzstan and India, it is important to provide an overview of their respective healthcare systems. Kyrgyzstan and India have distinct healthcare systems, characterized by differences in infrastructure, access to healthcare facilities, and resources. Kyrgyzstan, a country situated in Central Asia, has a healthcare system that is predominantly government-funded. In contrast, India has a mixed healthcare system that includes both public and private sectors. Access to healthcare in Kyrgyzstan is relatively limited, particularly in rural areas. This lack of healthcare facilities in rural areas could result in delayed diagnosis and treatment of cardiovascular diseases, including heart attacks. On the other hand, India, as the second-most populous country in the world, faces unique challenges in providing healthcare services to its vast population.

Treatment Methods for Heart Attacks in Kyrgyzstan

Research on the treatment methods for heart attacks in Kyrgyzstan is limited. However, it can be inferred that the treatment approach in Kyrgyzstan may be influenced by factors such as limited resources and access to healthcare facilities. In Kyrgyzstan, the healthcare system may primarily rely on basic interventions, including the administration of aspirin and oxygen therapy, to manage heart attacks. Limited access to specialized cardiac care and medical interventions such as angioplasty or bypass surgery may result in a reliance on conservative management approaches. Comparative studies on drug treatments for heart attacks in Kyrgyzstan and India are essential to understand the effectiveness and outcomes of different treatment approaches in these countries

Treatment Methods for Heart Attacks in India

The treatment methods for heart attacks are more diverse and advanced compared to Kyrgyzstan. India has seen significant advancements in cardiac care, with the establishment of specialized cardiac centers and the availability of state-of-the-art medical technology. These advancements have allowed for a wide range of treatment options for heart attacks, including pharmacological interventions, percutaneous coronary intervention, and coronary artery bypass graft surgery.

Pharmacological Approaches in Kyrgyzstan and India

Research on pharmacological approaches for the treatment of heart attacks in Kyrgyzstan and India is essential to compare the effectiveness of drug therapies in these countries. In Kyrgyzstan, limited resources and access to healthcare facilities may result in a more conservative approach to drug therapies for heart attacks. Basic medications such as aspirin may be prescribed to manage symptoms and prevent further complications.

Cultural Factors Influencing Drug Choice and Treatment

The impact of cultural factors on drug choice and treatment for heart attack patients is a topic that requires in-depth analysis. Cultural factors play a significant role in determining the choice of drugs and treatment options for heart attack patients. Different cultural beliefs, practices, and perceptions towards healthcare can affect the preferences and acceptance of certain drugs. For example, in Indian culture, home treatment, self-medication, and the use of Ayurvedic herbs for treating illnesses are deeply rooted practices (Sachdeva et al., 2015). This cultural inclination towards traditional

remedies may influence the choice of treatment options for heart attack patients in India. On the other hand, in Kyrgyzstan, cultural factors may influence the preference for professional help and psychosocial support.

Comparative Analysis of Treatment Efficacy: Kyrgyzstan versus India

A comparative analysis of treatment efficacy in Kyrgyzstan and India is crucial to understand the effectiveness of heart attack treatments in these two countries. Evidence suggests that patient perspectives on information needs and involvement in medication regimes are transcultural on a meta-level of patient experiences and needs, as observed in heart failure patients in various countries, including Asia (Baudendistel et al., 2015).

Future of Heart Attack Treatment in Kyrgyzstan and India

The future prospects for heart attack treatment in Kyrgyzstan and India require careful consideration. Cultural factors play a significant role in shaping the future of heart attack treatment in both Kyrgyzstan and India.

Key Findings from Comparative Analysis

The comparative analysis of heart attack treatment in Kyrgyzstan and India reveals several key findings. Firstly, cultural factors significantly influence the choice of drugs and treatment options in both countries. In India, cultural practices such as self-medication and the use of Ayurvedic herbs are deeply rooted and may impact the preferences for traditional remedies in treating heart attack patients. Additionally, cultural factors in Kyrgyzstan may influence the preference for professional help and psychosocial support. Secondly, the analysis shows that patient perspectives on treatment efficacy and information needs are transcultural. Patients in both Kyrgyzstan and India express the need for professional help and information regarding their heart attack treatment.

Implications of the Research Findings Implications of the Comparative Study

The comparative study of heart attack treatment in Kyrgyzstan and India has several implications for healthcare professionals, policymakers, and researchers. Firstly, it highlights the importance of considering cultural factors when designing and implementing heart attack treatment strategies in different countries. This research demonstrates that cultural factors, such as language, religion, dietary restrictions, and communication styles, play a crucial role in drug choice and treatment decisions.

Conclusion and Recommendations In conclusion, this research article provides a comparative study of heart attack treatment in Kyrgyzstan and India, with a focus on the impact of cultural factors on drug choice and treatment, treatment efficacy, and future prospects for heart attack treatment. The findings suggest that cultural factors significantly influence the choice of drugs and treatment options in both countries, with traditional remedies and self-medication being common in India but with a preference for professional help and psychosocial support in Kyrgyzstan. Based on these findings, it is recommended that healthcare professionals develop culturally competent care strategies that take into account the cultural norms and practices of patients.

References

1. Ferdousi, N., Anik, M E K., Binti, N N., & Islam, L N. (2020, January 1). Oxidase Enzyme Activities and Their Correlations with Antioxidative Stress Biomarkers in Patients with Acute Coronary Syndrome in Bangladesh. <https://scite.ai/reports/10.4236/wjcd.2020.104017>
2. Manckoundia, P., Buzens, J., Mahmoudi, R., D'Athis, P., Martin, I., Laborde, C., Menu, D., & Putot, A. (2017, September 21). The prescription of antiplatelet medication in a very elderly population: An observational study in 15 141 ambulatory subjects. <https://scite.ai/reports/10.1111/ijcp.13020>
3. Sridhar, V. (2018, October 11). Comprehensive Screenings for Diabetes, Hypertension, and Mental Illness in Rural India. <https://scite.ai/reports/10.5070/q22141230>
4. <https://pubmed.ncbi.nlm.nih.gov/29755869/#&gid=article-figures&pid=figure-1-uid-0>
5. <https://www.facebook.com/SocialActionPovertyinIndia/photos/a.425426730982375/425426734315708/?type=3>
6. Умурзакова, Г., Момунова, А., Абхай Раж, Ч., & Киргизбаева, У. (2023). Сравнительный анализ факторов риска сердечно-сосудистых заболеваний и стратегий управления в Индии и Кыргызстане: межстрановое исследование. *Вестник Ошского государственного университета. Медицина*, 1(1), 1-6. [https://doi.org/10.52754/16948831_2023_1\(1\)_1](https://doi.org/10.52754/16948831_2023_1(1)_1).