OPEN ACCESS Freely available online

Journal of Clinical Toxicology

ISSN: 2161-0495

Short Communication

Pharmacology of Congestive Heart Failure

Habibiyan Ahmadi*

Department of Rehabilitation, Warsaw Division of Physical Medicine, Military Medical Institute, Jan Kochanowski University, Kielce, Poland

ABSTRACT

Congestive cardiac failure or Congestive heart failure is a state at which heart cannot supply blood sufficiently to maintain homeostasis. Heart failure can occur if the center cannot pump (systolic) or fill (diastolic) adequately. Symptoms include shortness of breath, fatigue, swollen legs and rapid heartbeat. Treatments can include eating less salt, limiting fluid intake and taking prescription medication. In some cases a defibrillator or pacemaker could also be implanted.

Keywords: Heart failure; Heart congestion; Ventricles; Blood vessels

INTRODUCTION

CCF (Congestive Cardiac Failure) or CHF(Congestive Heart Failure) is mainly caused by a weakened heart muscle that is unable to effectively circulate blood throughout the body. This weakness is mainly caused by narrowing the small blood vessels which supplies oxygen to heart which is major source for proper functioning of heart. These blocked vessels make the heart to work faster making the heart muscles weaker day by day. After some span of time, heart muscles get weaker and lose its pumping action [1]. The main pumping chambers of the guts (the ventricles) can change size and thickness, and either can't contract (squeeze) or can't relax (fill). This triggers fluid retention, particularly within the lungs, legs and abdomen. The major causes of coronary failure include coronary heart condition and attack, high vital sign, damage to the guts muscle (cardiomyopathy), heart valve problems and abnormal heart rhythms of these; coronary heart condition and attack are the foremost common causes [2]. The major factors that contribute to coronary heart disease includes obesity, unhealthy eating, high blood pressure, diabetes, smoking, high levels of cholesterol, excessive intake of alcohol and physical inactivity.

SYMPTOMS

Symptoms of coronary failure includes new or worsening shortness of breath (particularly during physical activity or waking you up at night), difficulty lying flat in the dark fainting or passing out (syncope), weight gain (more than 2 kg per week), muscular fatigue, tiredness, swelling of ankles or legs, swelling of abdomen, dizziness, heart palpitations (heart pounding or beating too fast), chest pain or discomfort in parts of the upper body, unexplained coughing and wheezing, loss of appetite, constipation.

DIAGNOSIS

To confirm an initial diagnosis, doctor might order certain diagnostic tests to examine your heart's valves, blood vessels, and chambers. There is a spread of tests wont to diagnose heart conditions. Because these tests measure various things, your doctor may recommend a couple of to urge a full picture of your current condition. The tests may include Electrocardiogram, Echocardiogram, MRI, Stress test, Blood tests and Cardiac catheterization (Table 1) [3-5].

Stage	Main symptoms	Outlook
Class 1	You don't experience any symptoms during typical physical activity.	CHF at this stage can be managed through lifestyle changes, heart medications, and monitoring.
Class 2	You're likely comfortable at rest, but normal physical	CHF at this stage can be managed through lifestyle changes, heart

Correspondence to: Ahmadi H, Department of Rehabilitation, Warsaw Division of Physical Medicine, Military Medical Institute, Jan Kochanowski University, Kielce, Poland, E-mail: Hahmadi01@hotmail.com

Received: September 07, 2021; **Accepted:** September 21, 2021; **Published:** September 28, 2021

Citation: Ahmadi H (2021) Pharmacology of Congestive Heart Failure. J Clin Toxicol. S19:001.

	activity may cause fatigue, palpitations, and shortness of breath.	medications, and careful monitoring.
Class 3	You're likely comfortable at rest, but there's a noticeable limitation of physical activity. Even mild exercise may cause fatigue, palpitations, or shortness of breath.	Treatment can be complicated. Talk with your doctor about what heart failure at this stage may mean for you.
Class 4	You're likely unable to carry on any amount of physical activity without symptoms, which are present even at rest.	There's no cure for CHF at this stage, but there are still quality of life and palliative care options. You'll want to discuss the potential benefits and risks of each with your doctor.

Table 1: All cases of B-cell lymphomas with flower cell morphology in chronological order.

CONCLUSION

There are several medications that can be used to treat CHF, including ACE inhibitors, beta-blockers along with antiarrhythmic medications, antihypertensive medications and albuterol. Diuretics, cardiac resynchronization therapy, implantable cardioverter defibrillator, sometimes it needed coronary artery bypass surgery.

REFERENCES

1. Francis GS, Tang WW. Pathophysiology of congestive heart failure. Rev Cardiovascular Medicine. 2003;4(S2):14-20.
2. Goodlin SJ. Palliative care in congestive heart failure. J Antimicrob Chemother. 2009;54(5):386-396.
3. Figueroa MS, Peters JI. Congestive heart failure: diagnosis, pathophysiology, therapy, and implications for respiratory care. Rcjournal. 2006;51(4):403-412.
4. Vasan RS, Benjamin EJ, Levy D. Congestive heart failure with normal left ventricular systolic function: clinical approaches to the diagnosis and treatment of diastolic heart failure. Arch Intern Med. 1996;156(2):146-157.
5. Whitehurst T, McGivern J, McClure K, Thacker J. Inventors; Advanced Bionics Corp, Assignee. Treatment of Congestive Heart Failure. United States Patent Application. 2004;10:512,713.