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CORONARY HEART DISEASE



Introduction

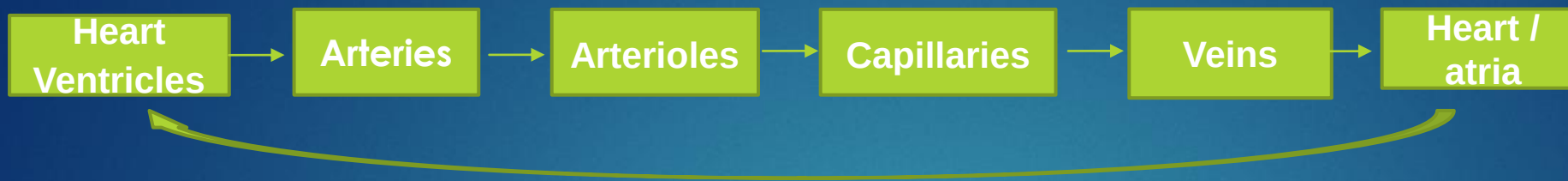


Coronary Heart Disease

The aim of the presentation is to assess Patient A heart problems, as well as the impact of his lifestyle.

Importance to measure lifestyle

- To make changes to patient way of life.
- To comprehend the significance of a patient's health status as both a risk factor and a health outcome.
- To help control quality of life of the patients across care providers.



Anatomy of the heart:

- The heart, which is located between the lungs in the middle of the chest pumps blood via cardiovascular system. It sends blood to organs, tissues, and sells.
- Blood carries oxygen, and waste away from cells.
- Arteries, blood vessels, and capillaries carries blood from the heart to the body. Blood returns to the heart via veins and venules.

Physiology of the heart:

- The heart is made up of four chambers: two atria and two ventricles. The venous circulation returns deoxygenated blood to the right side of the heart. It is pumped into the right ventricle and then into the lungs, where carbon dioxide is expelled and oxygen is taken in.

Coronary heart disease:

Heart disease involves multiple conditions. Plaque buildup in the heart's arteries causes CHD. Atherosclerosis narrows and builds plaque. Plaque contains fat, cholesterol, and other lipids. Plaque in coronary arteries lowers blood flow to the heart, reducing oxygen to the heart muscle.



Main point includes in the health check questionnaire:

- **To find out more about lifestyle of the Patient A**
- **If he smoking cigarette**
- **Drinking alcohol frequency**
- **If he takes any drugs**
- **His diet**
- **His age and background**
- **His activity level, and etc.**





Coronary Heart Disease (CHD)

Lifestyle health check of the Patient A



Risk factors and cauces

- Patient's age (55)
- Smoking tabaco (20pd)
- Drinking alcohol (every day)
- Family health history
- White British

Lifestyle of the Patient

- Unemployed
- No other activities involved such a(gym ,swimming ,jogging etc.
- Cycle once per week
- Walks to near bar or shop
- Minimal housework

Drinking and eating habits

- Patient often drinks few pints of beer
- He also drinks occasionally spirts
- At least once a week forget about things
- Very often skipping to do things
- He's family were concern about his bad habits

Lifestyle health Information



Some of the risk factors in patient A are linked. His diet, for example, can affect his cholesterol levels and blood pressure, as well as his body weight and diabetes management. As a result, one of the most important things he can do to lower his risk of heart disease is to eat healthily and maintain a healthy weight!



It's also important to consider the link between alcohol use and smoking cigarettes. These two things known as a big risk factors for heart disease.

Care recommendations



British Heart Foundation (BHF)

- To make heart failure awareness priority
- Support research and educational programmes about heart diseases
- Working toward equality of the care
- Promote healthy lifestyle

National Health Services (NHS)

- Regularly monitoring health condition of the Patient A
- Providing with dieting information
- Supporting Patient with mentally and physically activities
- Cheeking regularly patient blood pressure and cholesterol level



Conclusion

Patient Improvement A health demands not just different sorts of activity, but also a different attitude and culture shift - from the NHS as a disease service to one that promotes health, views health as an asset, and rewards health-related activities and achievements. Patient A needs to be more engaged, capable of improving health and receiving change across boundaries, and capable of sharing and spreading excellent practise.



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