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**THE INFLUENCE OF ZOFENOPRIL AND ENALAPRIL AS PART OF**

**STANDARD THERAPY ON THE DYNAMICS OF INDICATORS OF**

**CARDIOHEMODYNAMICS IN PATIENTS WITH ACUTE MYOCARDIAL**

**INFARCTIONWITH CONCOMITANT OBESITY**

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**Introduction.** Nowadays acute myocardial infarction (AMI) occupies a leading position as a reason

of death all over the world. The course of AMI is significantly complicated by the presence of

concomitant obesity. The successes achieved in the last decades in the treatment of the cardiovascular

system are due to the usind of drugs that reduce the activity of the renin-angiotensin-aldosterone

system, in particular angiotensin-converting enzyme inhibitors.

The purpose of the present research is to evaluate the efficacy of treatment of patients with acute

myocardial infarction and obesity by comparing the effects of zofenopril and enalapril on

cardiomodynamic indicators.

**Materials and methods.** 75 patients withAMI and ST segment elevation and obesity were examined.

Statistical processing of the received data was carried out using the package of statistical programs

"Microsoft Excel". All patients were treated in accordance with the Order of the Ministry of Health

№455 dated 02.07.2014 "Unified clinical protocol of emergency, primary, secondary (specialized)

and tertiary (highly specialized) medical care and medical rehabilitation of patients with acute

coronary syndrome with elevation of ST segment". 2 groups of patients were formed: 1st group of

patients with AMI and obesity, which included enalapril in the dose of 10-40 mg per day (n=37) in

the standard therapy; 2nd group of patients with AMI with concomitant obesity, who received

zofenopril in the standard therapy at a dose of 15-60 mg per day (n=38).

**Results.** In the 2nd group, the final diastolic volume decreased by 10,6 % (p<0,05), the final systolic

volume decreased by 15,19 % (p<0,05), the ejection fraction increased by 15,49 % (p<0,05). In the

1st group, there was also positive dynamics, but less significant: KDO decreased by 10,51 %

(p<0,05), KSO by 9,6 % (p<0,05), FV increased by 10,87 % (p<0,05). According to the indicators of

the left atrium, the final diastolic size, the final systolic size, the thickness of the posterior wall, the

thickness of the interventricular membrane, no probable changes were detected (p˃0,05).

**Conclusion.** The most significant positive changes in indicators of cardioghemodynamics were

among the patients taking zofenopril compared with the enalapril group.