

## BUNDLE BRANCH BLOCK, GIS TUFT BLOCKADE

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**Research Materials:** Bundle branch block is a conduction disorder within the heart characterized by a slowing or complete cessation of the conduction of excitatory impulses along one or more branches of the His bundle. . Blockage of bundle branches can be detected only during instrumental examination or is symptomatically manifested by rhythm disturbances, dizziness and attacks of loss of consciousness. Bundle branch block is diagnosed using electrocardiography. Treatment of bundled branch blocks is reduced to eliminating the causes of conduction disorders; In some cases, it may be necessary to install an artificial pacemaker.

**Research:** Congenital and acquired heart defects - aortic and mitral valve stenosis, pulmonary artery stenosis, aortic valve stenosis and coarctation, aortic valve insufficiency, atrial septal defect;

cardiomyopathy, myocardial dystrophy of various origins - endocrine (thyrotoxicosis, diabetes mellitus), metabolic (anemia), nutritional (alcoholism, obesity), autoimmune (systemic lupus erythematosus, rheumatoid arthritis);

cardiac ischemia;

cardiosclerosis, as a result of many heart diseases, leads to the replacement of some muscle fibers with scar tissue, including atypical muscle fibers;

myocarditis of viral or bacterial origin;

heart damage due to rheumatism - endocarditis, myocarditis;

myocardial infarction;

long-term arterial hypertension leads to myocardial hypertrophy;

poisoning with cardiac glycosides;

pulmonary embolism;

chronic lung diseases (chronic obstructive bronchitis, pulmonary emphysema, severe bronchial asthma), lead to the formation of cor pulmonale - stagnation of blood in the right atrium and ventricle with their hypertrophy and expansion.

In young children and adolescents, incomplete single fascicular right block may accompany small anomalies in the development of the heart and is considered a normal variant in the absence of organic heart damage.

**Research goals and objectives:** Most clinical cases of the disease occur without any symptoms. Incomplete single fascicular blocks almost never show symptoms, so they are only detected by EKG during a routine examination. But with a complete blockade of the right leg, usually in the absence of organic heart damage, the person has symptoms. These include:

- various changes when listening to heart sounds;
- dizziness;
- presyncope and fainting;
- feeling of lack of air;
- shortness of breath;
- decreased performance;
- poor exercise tolerance;
- fatigue and weakness;
- sometimes pain in the heart;
- a feeling of interruptions in the work of the heart.

In addition, a clinical picture corresponding to the main disease may appear - it affects the heart and other organs and systems. The most serious symptoms appear in acute heart pathologies - heart failure, myocardial infarction, which are often accompanied by various heart blocks against the background of damage to the ventricular myocardium.

**Observed results:** To make a diagnosis, you will also need electrocardiography (ECG) data, which will allow you to determine the changes that are characteristic of each type of blockade. Also, daily ECG monitoring indicators (Holter monitoring) are necessary - a diagnostic procedure that involves the patient wearing a portable ECG device during the day. At the same time, a diary is kept in which all the patient's movements (getting up, eating, physical activity, emotional anxiety, deterioration of health, lying down, waking up at night) are recorded. ECG and diary data are compared, thus identifying intermittent heart conduction disturbances associated with physical activity, food consumption, stress or night blockages.

**Conclusion:** Electrophysiological research data (stimulation of the heart with small electrical impulses with simultaneous recording of the ECG) can be informative. The procedure is carried out through the esophagus (the electrode is inserted through the esophagus; only the atria can be stimulated) or invasive (the electrode is inserted into the heart cavity by inserting a special catheter through a large blood vessel). ECG results are used in cases where they do not provide accurate information on the type of blockade, fainting, as well as to assess the state of the heart conduction system.

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