Title page

The impacts of cardiovascular disease on adults

Cardiovascular disease is prevalent among 50 percent of US adults according too American Heart Association. It is also identified as the leading cause of deaths across the world. The statistics of 2019 depicts significant rise in the deaths associated with cardiovascular disease. Cardiovascular disease is defined ass “conditions that involve narrowed or blocked blood vessels that can lead to a heart attack, chest pain (angina) or stroke. Other heart conditions, such as those that affect your heart's muscle, valves or rhythm, also are considered forms of heart disease” (Mayo, 2017). The risks of the disease can be prevented by lifestyle choices. Adults who develop CVD are unable to participate in normal life activities. Victims of the disease are more likely to experience cardiac arrest, stroke, heart attack and heart failure. The prevalence of CVD is high in American as the facts indicate that half of the population are art high risks of developing the disease. CVD impacts the physical, socioeconomic and psychological aspects of the adult life.

Adults with Cardiovascular Disease (CVD) exhibit high levels of hypertension that indicates high levels of blood pressure. Hypertension is common among adults with CVD that leads to serious health problems including deaths. High blood pressures impact the arteries and muscles that increase the risks of cardiac arrest. This undermines the ability of heart to supply blood to different organs of the body. The clot can struck in narrow arteries that often leads to heart attack. Pumping heart is difficult due to high blood pressure and this causes changes in the chamber of the heat. The complications associated with CVD include heart failure, ischemic heart disease, sudden cardiac arrest, heart attack, stroke and arrhythmia. The patients are less likely to feel healthy because they undergo chest pain, chest tightening and experience shortness of breath. Fatigue and laziness are common symptoms which prevent individuals from taking part in physical activities (Hert, Detraux, & Vancampfort, 2018). They are seen less active and fail to participate in physical activities. Shortness of breath is another issue faced by adults. This undermines their capacity of breathing and discourage them from performing physical work. breathing becomes more difficult due to congestion, fever and asthma.

Empirical evidence reveals that adults are more at risk of developing CVD who fail to maintain healthy lifestyles. The triggering factors include obesity, high cholesterol intake, smoking and physical inactivity. The studies have also suggested that engaging in physical activity helps in mitigating the risks of CVD. The prevalence of heart disease is common among adults in America. The evidence suggests that people who are victims of this disease are more likely to spend days in hospital. The degree of hypertension is significantly high among adults who are diagnosed with CVD (Carnethon, 2009). Elevated cholesterol levels and smoking also undermine their health. American Heart Association has developed the standards for offering effective care to the patients. The patients complain about chest pain, dizziness, nausea, fatigue, edema, cough, palpitations and claudication. These factors undermines the health status of the individuals.

Adults diagnosed with CVD are unable to perform better in their academic careers and jobs. This is because deteriorated health condition discourage them from taking part in work. Fatigue is a common factor that undermine their participation and involvement in different tasks. Evidence suggests that even after few hours of work, patients with CVD get tired (Oster, Watkins, Hill, Knight, & Meyer, 2017). Low performance at jobs or colleges is due to lack of concentration power. The findings indicate that adults are unable to participate in these activities because they exhibit low level of concentration. Adult patients complain about lack of will power. This reflects that CVD deteriorate individual’s involvement in academics or work (Carnethon, 2009). The conditions indicates they exhibit los morale and determination. Physical inactivity increases the risk of death in adults with CVD.

Evidence depicts that CVD has negative impacts on social lives of adults. Social demographics depicts that most of the patients undergo social loneliness. This is because majority of the adults are unable to accept the disease which affect their relationship with others. They are unhappy with the disease and exhibits discomfort for sharing it with others. Evidence suggests, “loneliness and social stress were associated with activation of the hypothalamic pituitary adrenocortical axis and the sympathetic nervous systems” (Xia & Li, 2018). Lack of social connections is a common issue identified among such adults. They avoid engaging in communication with others and maintain distance which is due to lack of trust. The research studies have also revealed that adults with CVD are unwilling to build friendly relationship with others because they lack trust. They maintain distance for not explaining the disease. It is also found that in public adults prefer to conceal their disease. Adults with CVD are unable to build effective relationship with families. They are living in isolation in their room. The studies have also determined that these patients need more social support for accepting and coping with the disease. Lack of people’s ability to understand the need of adults with CVD promote social isolation.

Cardiovascular disease in adults leads to many psychological problems. Empirical evidence depicts that patients with CVD exhibit disturbed behaviors. Their negative moods discourage them from taking part in healthy activities. The study of thee psychiatric aspects depicts that these patients exhibit high levels of anger, anxiety and stress (Smith & Blumenthala, 2011). Significant studies have proved the link of negative emotions with CVD. This indicates that adults with CVD are undergoing psychological problems that undermine their performance in every aspects of life. Their disturbed moods promote feelings of aggression, anger and helplessness (Xia & Li, 2018). Various psychosocial models are proposed for helping patients in improving their psychological behaviors. Behavioral factors are also the cause of non-adherence in physical and social activities. These adults are short tempered and show elevated anger at different events. Negative moods are linked to hypertension that increase the risks of cardiac arrest and deaths (Hert, Detraux, & Vancampfort, 2018). Finding indicates that managing stress and hypertension is crucial among adults with CVD because this increase the likelihood of deaths.

Depression is a commonly identified problem in adults with CVD. This is linked to deteriorated health condition. The patients that undergo depression are unable to focus on healthy lifestyle interventions. Their non-corporative attitudes promote negative feelings that increases the risks of cardiac arrest (Reynolds, et al., 2012).

Physical activity is important for maintaining blood glucose levels and minimizing the risks of coronary heart disease. Physical activity is advised according to the health condition and status of the patient. The patient will be advised to perform different exercises that will involve movement of the body parts. Planned exercise is a practical method for reducing weight as movement causes increase in energy (Xia & Li, 2018). Regular exercise delays the consequences of cardiovascular disease. The exercise involved in the plan include aerobic exercise. It is used for improving the muscle strength, oxidases enzymes and boosts the immune system. The patient will engage in exercise at three different times for 30 minutes in the beginning. She will be discouraged from sitting for longer duration. Light activity of every 30 minutes boos energy and improves the level of glucose (Hert, Detraux, & Vancampfort, 2018). The appropriate movements involve 15 minutes post-meal walk, 3 minutes light walking and 30 minutes walk in the morning. This improves the glycemic control and provides resistance against heart disease. The protocol suggests submaximal tests to measure the aerobic capacity. The treadmill protocol and the step-mil protocol are effective in determination of the aerobic capacity. The only physician supervises the protocol and measures the capacity.

Different strategies are suggested for improving thee health of patients with cardiovascular disease. The assessment of the patients with disease reveal the symptoms of seriousness. The assessment process recommends rest when the heart rate in resting state is equal or greater to 110 beats per minute, and the blood pressure is equal to or greater to 160/ 100 mm (Oster, Watkins, Hill, Knight, & Meyer, 2017). The assessment shows that heart rate is stable and the blood pressure is 139/ 92, so there are fewer risks involved in engaging patients with other programs. It is important to determine the BP rate for proper examination and identifying the risks of cardiac arrests (Hert, Detraux, & Vancampfort, 2018).

The assessment of the patient’s conditions depicts that she requires an efficient health management plan. Therapeutic intervention is an effective tool for controlling BP in CVD patients. The plan stresses on the adoption of lifestyle intervention that will encourage Amanda to change her unhealthy lifestyle (Haskell, Troiano, Hammond, Phillips, & Strade, 2012). This intervention will require changes in thee dietary and physical patterns. Guidelines are adopted for lifestyle intervention that highlights the instructions for dietary patterns and physical activity. the baseline weight reduction is set for 4-6 months (ACE, 2016). The intervention is essential because reduction of weight is linked to decline in hypertension that further minimize the risks of cardiovascular disease

The improvement plan emphasize on using “low-calorie diets can reduce A1C to <6.5% (48 mmol/mol) and fasting glucose to <126 mg/dL (7.0 mmol/L) in the absence of pharmacological therapy or ongoing procedures” (ADA, 2016). It is also important to assure that the level of glucose are maintained at stable levels. The use of medication is advised once a day. The patient is advised to take low-calorie food for attaining better results (Smith & Blumenthala, 2011). The facts indicates that the use of this medication with low-calorie food increase the chances of weight reduction. The dietary plan suggests that patient follows a proper timetable and take three meals. The patient is advised to consume low iron and low-calorie food. Amanda must use vegetables, legumes, fruits and milk in her diet. Stress eating must be avoided because it is linked to CVD.

The examination of cardiovascular disease in adults depicts that the disease negatively impacts the physical, social and mental life of thee patients. They are unable to accept the disease that promote anti-social attitudes. This discourage them from taking part in social activities or engaging with others in communication. The adults who lack family support are more likely to undergo negative incidents such as cardiac arrest or deaths. Adults with CVD also undergo psychological issues such as behavioral disturbance, elevated levels of anger and aggression. These factors are linked with hypertension that again increase the likelihood of deaths in patients. Physical inactivity is another common problem faced by adults with CVD which undermine their psychical strength.

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