



**TOSHKENT TIBBIYOT AKADEMIYASI URGANCH FILIALI**  
**JANUBIY OROLBO‘YI TIBBIYOT JURNALI**  
**2 - TOM, 2 - SON. 2026**  
**14.00.00 - TIBBIYOT FANLARI ISSN: 3093-8740**

**UDK: 616.12-008.46-089.5**

**DELLATATION CARDIOMYPATHY AND ITS TYPES.**



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**Abstract:** Dilated cardiomyopathy is a disease characterized by dilation of the main chambers of the heart and decreased systolic function, and is a group of myocardial diseases with various etiologies.

This disease is often accompanied by heart failure, arrhythmias, and thromboembolic complications, and the increasing prevalence of dilated cardiomyopathy in recent years and its high mortality rate further increase the urgency of this problem in the medical field.

In this study, the clinical course of dilated cardiomyopathy, methods of diagnosis and treatment tactics are considered. Also, special attention is paid to the issues of providing anesthesiological protection in patients with dilated cardiomyopathy during surgical operations requiring general anesthesia. Due to the high risk of hemodynamic changes in such patients, it is important to develop modern monitoring methods and balanced anesthesia tactics.

According to the results of the study, it is recommended to implement comprehensive anesthetic protection protocols to stabilize the cardiovascular system and reduce perioperative complications during repeated general anesthesia in dilated cardiomyopathy.

**Keywords:** dilated cardiomyopathy, general anesthesia, anesthetic protection, hemodynamics, heart failure.

**Relevance of the topic:** Currently, the number of cardiovascular diseases and their complications among the world's population is increasing every year. Among heart diseases, dilated cardiomyopathy (DCMP) is also widespread, characterized by severe clinical course and high mortality.

DCMP is a severe pathological condition characterized by myocardial dilation, decreased systolic function, and cardiac dysfunction, often leading to the development of heart failure, arrhythmias, thromboembolic complications, and cardiogenic shock.

Properly organizing general anesthesia during surgical procedures in such patients is a very responsible and complex process, since in DCMP the heart has limited reserve capabilities, is



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extremely sensitive to hemodynamic changes, and has an unusual response to anesthesia. Especially during repeated general anesthesia, there is a high risk of deterioration of the functional state of the heart, inability to bear the stress of anesthesia and surgery.

In modern medicine, new methods of anesthetic protection, including high-precision hemodynamic monitoring technologies, balanced anesthesia, individualized cardioprotection, and targeted use of vasoactive and inotropic agents, are gaining in importance. Development of special protocols and tactical approaches for optimal organization of anesthesia in patients with DKMP and reduction of its complications is one of today's requirements.

The relevance of this topic is also due to the fact that the growing trend of heart diseases, the increasing need for surgery against their background, and the increasing number of clinical cases requiring repeated anesthesia require a more in-depth study of this problem in the field of anesthesiology and intensive care. Research on the topic will allow us to improve anesthesia tactics, improve the quality of life of patients, and prevent anesthesia complications.

**Objective:** The aim of the study was to develop and evaluate the effectiveness of measures to improve anesthetic protection in order to preserve the cardiovascular system and reduce surgical complications during repeated general anesthesia in patients diagnosed with dilated cardiomyopathy (DCMP).

**Results:** According to the results of the study, systolic and diastolic blood pressure, heart rate, and oxygen saturation remained relatively stable during anesthesia in the main group. The number of preoperative complications (arrhythmias, hypotension, heart failure) was significantly lower in the main group than in the control group (20% and 50%, respectively,  $p < 0.05$ ). The length of stay in the intensive care unit was also reduced.

During the studies, clinical signs of DCMP were observed, depending on the stage of the disease and the degree of cardiac dysfunction, including signs of heart failure, namely shortness of breath, orthopnea, nocturnal prosystolic dyspnea, general weakness and fatigue, peripheral edema, tachycardia, arrhythmias, and hypotension.

Complications of the diseases diagnosed in patients included chronic heart failure, arrhythmias, cardiogenic shock, and death.

In diagnosing the above-mentioned diseases, we mainly use ECG, i.e. sinus tachycardia, arrhythmias, bundle branch blocks, ST-T segment changes, and Echocardiography, which shows dilation of the heart chambers, systolic dysfunction, valvular regurgitation changes, cardiomegaly in chest X-ray, signs of venous hypertension in the lungs, pathological processes in the pleura, myocardial fibrosis and injury foci in MRI were studied.

**In conclusion,** it can be said that the use of modern hemodynamic monitoring, individualized anesthesia tactics, and complex cardioprotection during repeated general anesthesia in patients diagnosed with dilated cardiomyopathy can stabilize the cardiovascular system, and has been shown to be effective in reducing perioperative complications. Based on the results of the research, it is considered appropriate to develop an anesthesiological protection protocol.

**References:**

1. Каримов, Р. Х., Мусаев, У. М., & Рузметова, Д. Т. (2023, August). ЯТРОГЕНИЯ НА ПРИМЕРАХ ИЗ ПРАКТИКИ (По данным лет обзор). In *International conference on multidisciplinary science* (Vol. 1, No. 1, pp. 10-12).
2. Каримов, Р. Х., Мусаев, У. М., Рузметова, Д. Т., & Султанов, Б. Б. (2023). ВРАЧЕБНЫЕ ОШИБКИ В ПРАКТИКЕ АКУШЕРОВ-ГИНЕКОЛОГОВ. In *Past and Future of Medicine: International Scientific and Practical Conference* (Vol. 2, pp. 114-117).
3. Каримов, Р. Х., Мусаев, У. М., Рузметова, Д. Т., & Султанов, Б. Б. (2023, October). ЯТРОГЕНИЯ В НЕОНАТОЛОГИИ (ПО ДАННЫМ ЛЕТ. ОБЗОР). In *International conference on multidisciplinary science* (Vol. 1, No. 3, pp. 76-78).



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4. Аташаев, А. Р., Каримов, Р. Х., & Собиров, М. М. (2025, March). ДЕЛИТАЦИОН КАРДИОМИОПАТИЯНИНГ БУГУНГИ КУНДАГИ ДОЛЗАРБЛИГИ. In *International conference on multidisciplinary science* (Vol. 3, No. 3, pp. 75-75).
5. Radzhapov Adilbek Anvarbekovich, Karimov Rasulbek Khasanovich, & Matchanov Jahongir Ruslanovich. (2025). KIDNEY DISEASES IN PREMATURE INFANTS. INTERNATIONAL CONFERENCE OF NATURAL AND SOCIAL-HUMANITARIAN SCIENCES, 2(3), 51–53. <https://doi.org/10.5281/zenodo.15320961>
6. Собиров М.М., Аташев А.Р., Р.Х.Каримов, & Хударганов И.А. (2025). ДЕЛИТАЦИОН КАРДИОМИОПАТИЯЛАРДА ТАКРОРИЙ УМУМИЙ АНЕСТЕЗИЯНИНГ АСОРАТЛАРИ. INTERNATIONAL CONFERENCE OF NATURAL AND SOCIAL-HUMANITARIAN SCIENCES, 2(3), 3–4. <https://doi.org/10.5281/zenodo.15129219>

