# Heart Failure with Preserved Ejection Fraction: From Guidelines to Real Life in Algeria

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Thank you for giving me the opportunity to present in your remarkable journal one of the problems encountered in our daily practice. 40 years of exercise in cardiology have allowed me to observe the epidemiological transition of cardiovascular diseases in Algeria ranging from rheumatic heart diseases almost completely eradicated due to the improvement in the standard of living and a prevention strategy towards since ten years an exponential increase in ischemic heart disease. 3 clinical patient profiles are concerned: menopausal women presenting a metabolic phenotype with obesity high blood pressure and diabetes, heavy smoker and metabolic middle aged man. Alongside these patients, thousands of younger people who are overweight or even obese remain completely impervious to therapeutic education and have lifestyles exposing them to the occurrence of cardiovascular diseases: This is the addiction to the internet and social networks preventing any physical activity except that of recovering meals very rich in sugars, fats and salt often ordered on the internet. Faced with the emergence of fast food, the sedentary lifestyle favored by the Internet, we should all think of a strategy to encourage physical activity and the production of computer software equipped with an alarm after 1 hour of internet depending on the user's profile. Similarly, school programs will have to make room for 1 hour of daily civic and sports education. In addition to that, it would be interesting for practitioners, whatever their specialty, to invest in the management of the psychological and metabolic profile of these young patients addicted to social networks.

Even more in order to help these young patients, to think about a coordination of different ministries: primary and secondary education, health, youth and sports, trade, culture for the care of these internet-addicted metabolic patients.

Regarding secondary prevention of cardiovascular disease, since 2004, i.e. for 22 year, I have been carrying out work in day hospital particularly interesting Algerian menopausal women and presented during the 25<sup>th</sup> European Meeting on hypertension and Cardiovascular Protection in Milan on June 12-15, 2015. Why? Because Menopause is a particular period making brutally the woman overexposure to the cardiovascular disease risk (CVD risk).

### **Objective of Our Study**

Objective of our study was to describe the lifestyle, clinical, echocardiography profile of menopausal women who attended our day hospital.

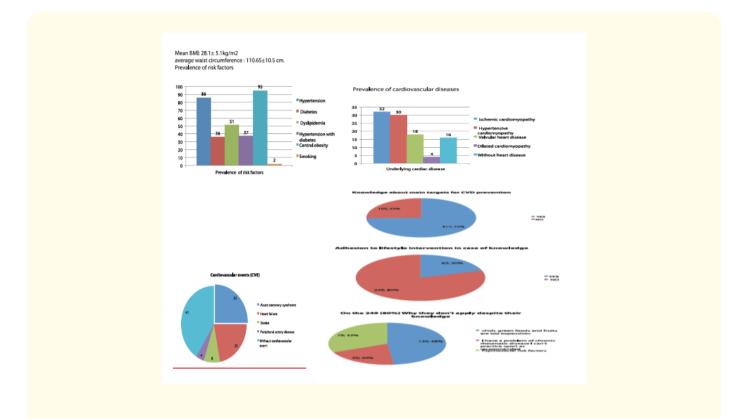
### Method

We examined prospectively 410 menopausal women between years 2008 - 2014, aged 70  $\pm$  10 (51 - 102) years in our day hospital department. Complete data including history of hypertension, diabetes, dyslipidemia, obesity, cardiovascular disease, body mass index, waist. Electrocardiography, echocardiography were assessed. Followed by tests about their knowledge of CVD risk.

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#### Results



#### Conclusion

Despite our education regarding cardiovascular risk factors most of women belonged to the sedentary or low physical activity and have a food too rich in salt, sugar and fats. Regarding these results and as recommended by the European guidelines for CVD prevention, established cognitive-behavioral strategies and counseling on psychosocial risk factors are recommended. Special attention should be considered to the application of preventive measures in menopausal women in addition to the pharmacological therapy with only two key words: healthy diet and physical activity. Few or none studies focus on the primary prevention of cardiovascular disease in young internet addicts, obese bulimics and prediabetics [1-3].

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