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Post COVID-19 Associated Cardiac Complications and Their Management

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ABSTRACT

One in every four COVID-19 patients may develop long-term signs and symptoms (Post COVID-19 problems or Post-Acute Sequel of SARS-CoV-2 – PASC), which will have substantial implications for the healthcare and economic systems in the coming years. Given the pathophysiology of the virus and the predominance of ACE-2 receptors, the cardiovascular system is one of the primary targets for the Post COVID-19 syndrome. Severe acute respiratory syndrome coronavirus-2 has led to possibly the worst pandemic of this century in the form of coronavirus disease 2019. According to our early personal experience "Life after COVID" campaign, a significant number of COVID-19 patients incur long-term cardiovascular effects. The patients might vary from a rhythm abnormality and blood pressure fluctuations to myocardial mechanical impairment and heart failure, as well as acute vascular indications of Post-Traumatic Stress Disorder. In fact, cardiac damage has been noted even without clinical features of respiratory disease. Part of the systemic inflammatory response in severe covid-19 is the release of high level of cytokines that can injure multiple tissues, including vascular endothelium and cardiac myocytes. Also, cytokine release syndrome occurs in patients with severe covid-19 infection. ACE inhibitors/ angiotensin receptor blockers, antiviral drugs, antibiotics, protease inhibitors, steroids, aspirin, convalescent plasma, ant parasitic drugs, vaccination, tocilizumab and hydroxychloroquine and chloroquine are the drugs given to the patients for the management of post cardiac manifestation.

Keywords: Post COVID-19, Cardiovascular system, Receptors, Rhythm, post-traumatic stress disorder

