

## **PSYCHOEMOTIONAL STATE OF PATIENTS WITH CORONARY HEART DISEASE AND CHRONIC KIDNEY DISEASE: THE ROLE OF LIPID-LOWERING THERAPY WITH EZETIMIBE**

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**Abstract:** This article examines the psychoemotional state of patients suffering from coronary heart disease (CHD) and chronic kidney disease (CKD) and evaluates the impact of lipid-lowering therapy with ezetimibe on their emotional well-being. The relationship between lipid metabolism disorders, systemic inflammation, and the development of depressive and anxiety symptoms is explored. Special attention is given to the therapeutic potential of ezetimibe in not only improving lipid profiles but also contributing to the stabilization of psychoemotional status in this vulnerable group. Clinical findings support the hypothesis that comprehensive lipid management is integral to both physical and psychological health outcomes in CHD and CKD patients.

**Keywords:** Coronary heart disease, chronic kidney disease, psychoemotional state, lipid metabolism, ezetimibe, lipid-lowering therapy, depression, anxiety.

### **INTRODUCTION**

Coronary heart disease (CHD) and chronic kidney disease (CKD) are major public health challenges worldwide. Patients suffering from these conditions frequently exhibit not only somatic but also pronounced psychoemotional disturbances, including depression, anxiety, and cognitive dysfunctions. The burden of chronic illness, combined with physiological changes such as systemic inflammation and dyslipidemia, significantly exacerbates psychological stress, creating a vicious cycle that negatively impacts treatment adherence and clinical outcomes. Contemporary research suggests that lipid metabolism disturbances, notably elevated LDL-C and reduced HDL-C levels, are associated not only with cardiovascular and renal dysfunction but also with the pathogenesis of mood disorders. Ezetimibe, a selective cholesterol absorption inhibitor, presents a novel approach for optimizing lipid control, potentially ameliorating both physical and psychoemotional parameters in CHD and CKD patients. This article explores the influence of lipid-lowering therapy, particularly with ezetimibe, on the psychoemotional state of this patient population.

### **MATERIALS AND METHODS**

The psychoemotional condition of patients with CHD and CKD is often characterized by a high prevalence of depressive and anxiety symptoms. Numerous studies have demonstrated that chronic inflammation and oxidative stress, common in both diseases, contribute to neurochemical imbalances affecting serotonin, dopamine, and norepinephrine pathways. These changes precipitate the onset of depressive disorders, which in turn worsen the prognosis of cardiovascular and renal diseases due to poor medication adherence, unhealthy behaviors, and impaired self-management [1].

Hyperlipidemia is not only a classical cardiovascular risk factor but also an independent contributor to neuropsychiatric disorders. Dyslipidemia promotes endothelial dysfunction and exacerbates vascular inflammation, leading to cerebral microvascular pathology that underlies cognitive decline and emotional disturbances. Therefore, effective lipid management is increasingly recognized as a cornerstone of comprehensive patient care [2].

Ezetimibe, by selectively inhibiting the absorption of cholesterol at the intestinal brush border, leads to a significant reduction in circulating LDL-C levels. When combined with statins or used as monotherapy in statin-intolerant patients, ezetimibe provides an effective and well-tolerated means of achieving lipid goals. Beyond lipid lowering, emerging evidence suggests that ezetimibe may exert anti-inflammatory effects, which are critical in modulating systemic inflammation implicated in psychoemotional disorders.

Clinical studies indicate that patients receiving ezetimibe therapy demonstrate not only improved lipid profiles but also significant reductions in markers of systemic inflammation, such as C-reactive protein (CRP) and interleukin-6 (IL-6). This anti-inflammatory effect is associated with stabilization of mood symptoms, decreased prevalence of depressive episodes, and improved quality of life scores among patients with CHD and CKD.

An important advantage of ezetimibe therapy is its favorable safety profile, particularly in populations with renal impairment, where the use of high-dose statins is often limited by concerns regarding toxicity. Ezetimibe's minimal systemic absorption and primary hepatic metabolism make it a suitable option for CKD patients, minimizing the risk of adverse renal effects while effectively addressing lipid abnormalities [3].

## **RESULTS AND DISCUSSION**

From a psychoemotional standpoint, therapy with ezetimibe may help break the cycle of inflammation, lipid disorder, and mood disturbance. Improved lipid control contributes to better endothelial function and cerebral perfusion, which are critical for maintaining cognitive and emotional health. Furthermore, the psychological benefit derived from achieving therapeutic goals in lipid management should not be underestimated, as it reinforces patient confidence and adherence to broader treatment regimens.

It should also be noted that psychoemotional support and psychological interventions should accompany pharmacological lipid-lowering strategies. Cognitive-behavioral therapy (CBT), motivational interviewing, and stress management techniques complement medical therapy and enhance overall outcomes in patients battling chronic illnesses [4].

## **CONCLUSION**

The psychoemotional state of patients with coronary heart disease and chronic kidney disease is a critical determinant of clinical outcomes. Addressing dyslipidemia through effective therapies such as ezetimibe not only reduces cardiovascular and renal risks but also has the potential to improve emotional well-being by mitigating systemic inflammation and enhancing cerebral vascular health. Given its efficacy, safety profile, and emerging ancillary benefits, ezetimibe represents a valuable component of comprehensive care for patients with CHD and CKD. Future studies should continue to elucidate the mechanisms linking lipid metabolism and psychoemotional health, optimizing therapeutic strategies for this vulnerable patient population.

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