

Hypertension, CAD, Angina and Heart Failure

The Escalation of Systemic Strain: A
Clinical Overview of Circulatory Disorders.

1. Hypertension

2. Coronary
Artery Disease

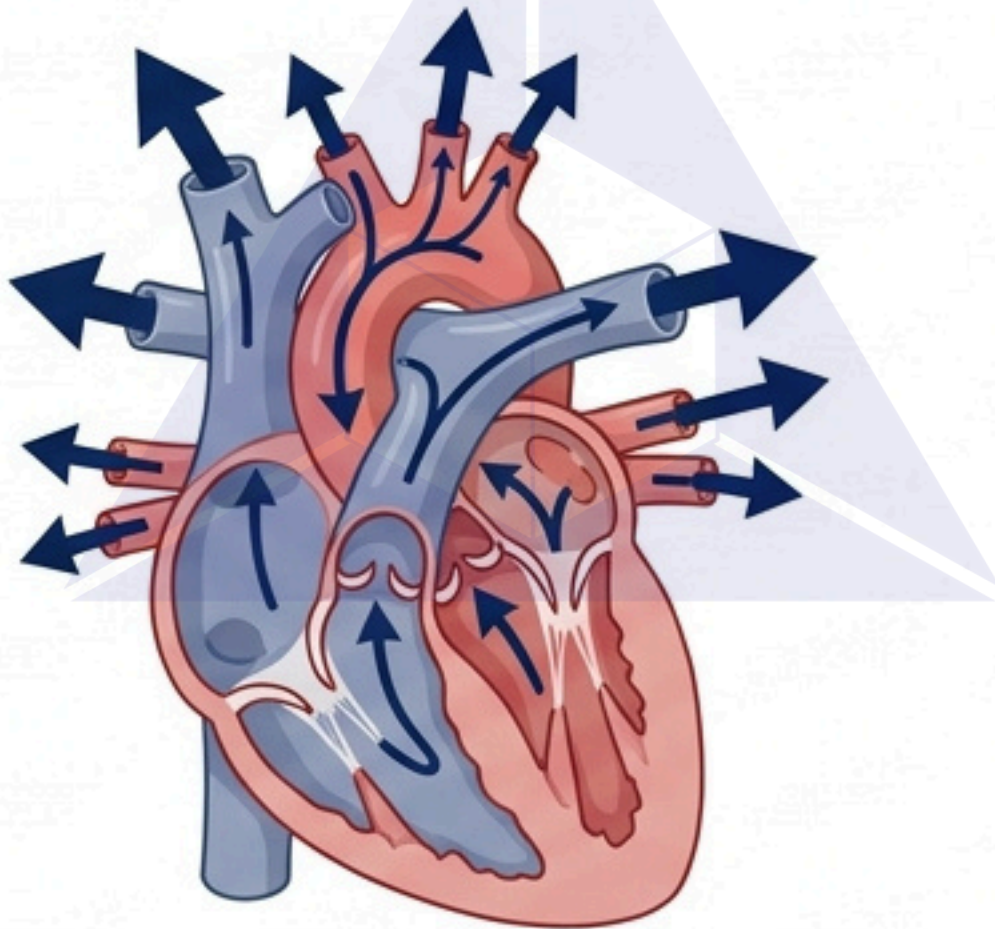
3. Angina
Pectoris

4. Heart
Failure

Hypertension: The Healthy Baseline

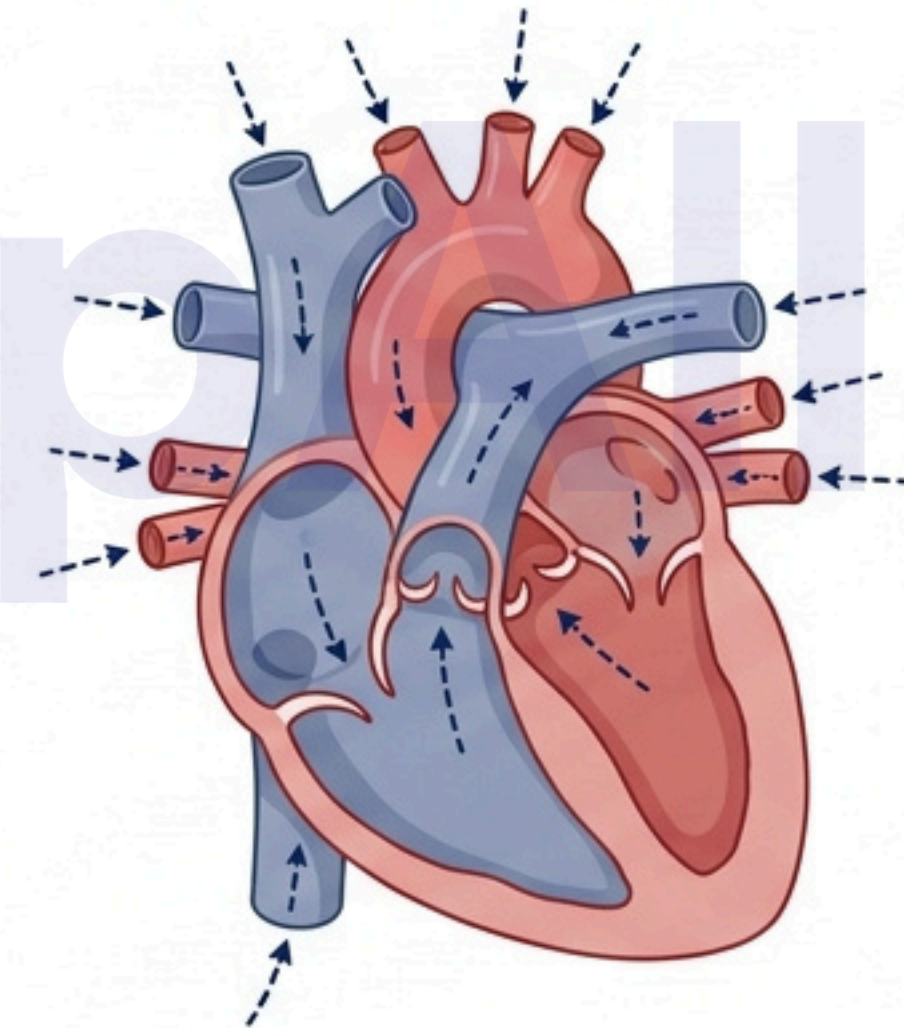
120 mm Hg

Systolic / Pumping Pressure



80 mm Hg

Diastolic / Resting Pressure

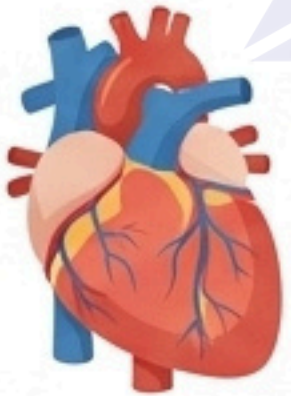


The Hypertension Threshold

$\geq 140/90$ mm Hg

120/80 mm Hg

Sustained Blood Pressure:
140/90 or higher



Heart Diseases



Brain Damage



Kidney Damage

Clinical Note: Hypertension is not just a heart issue; it is a systemic pressure overload that damages vital end-organs.



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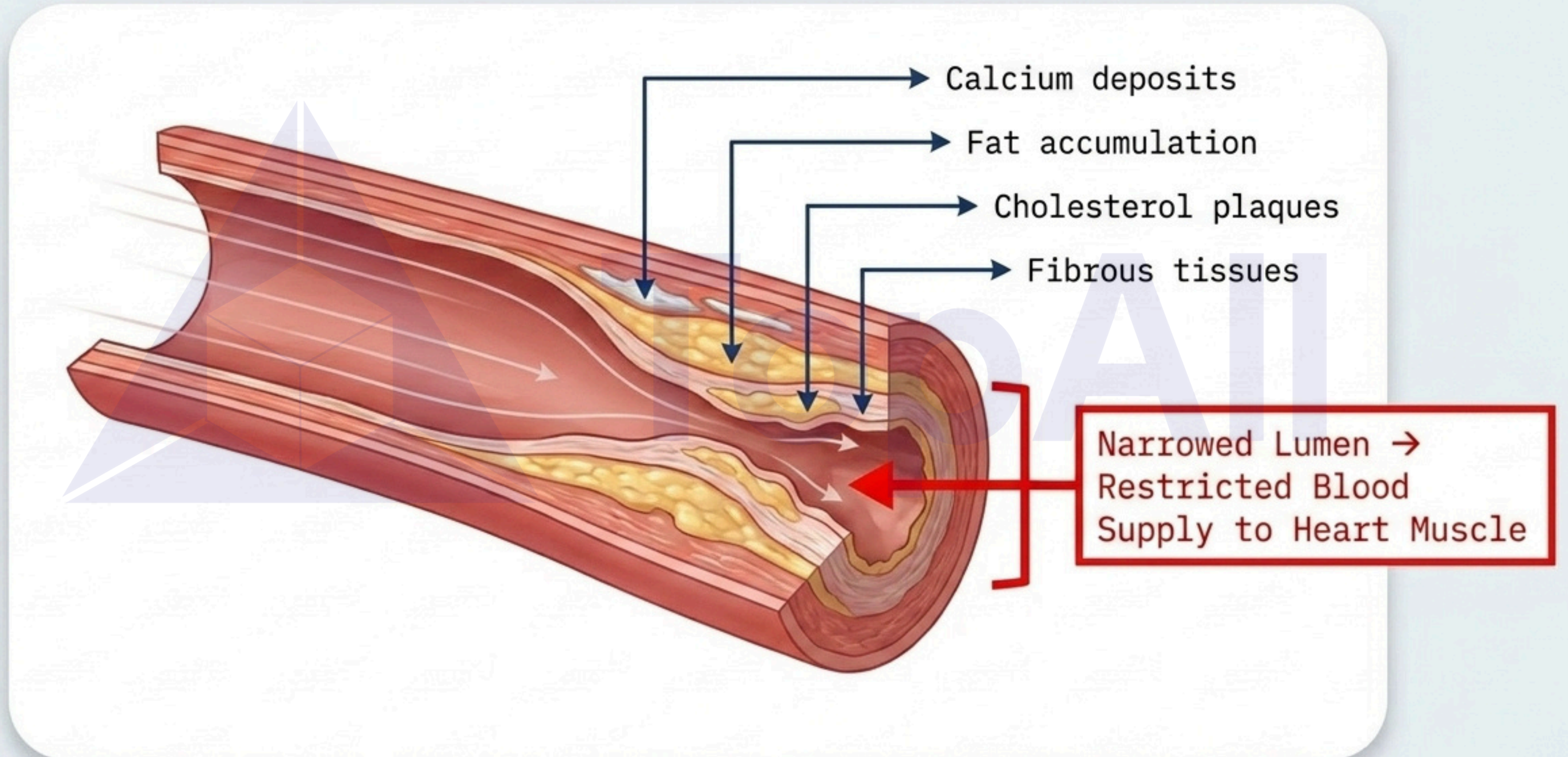
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Key Highlights

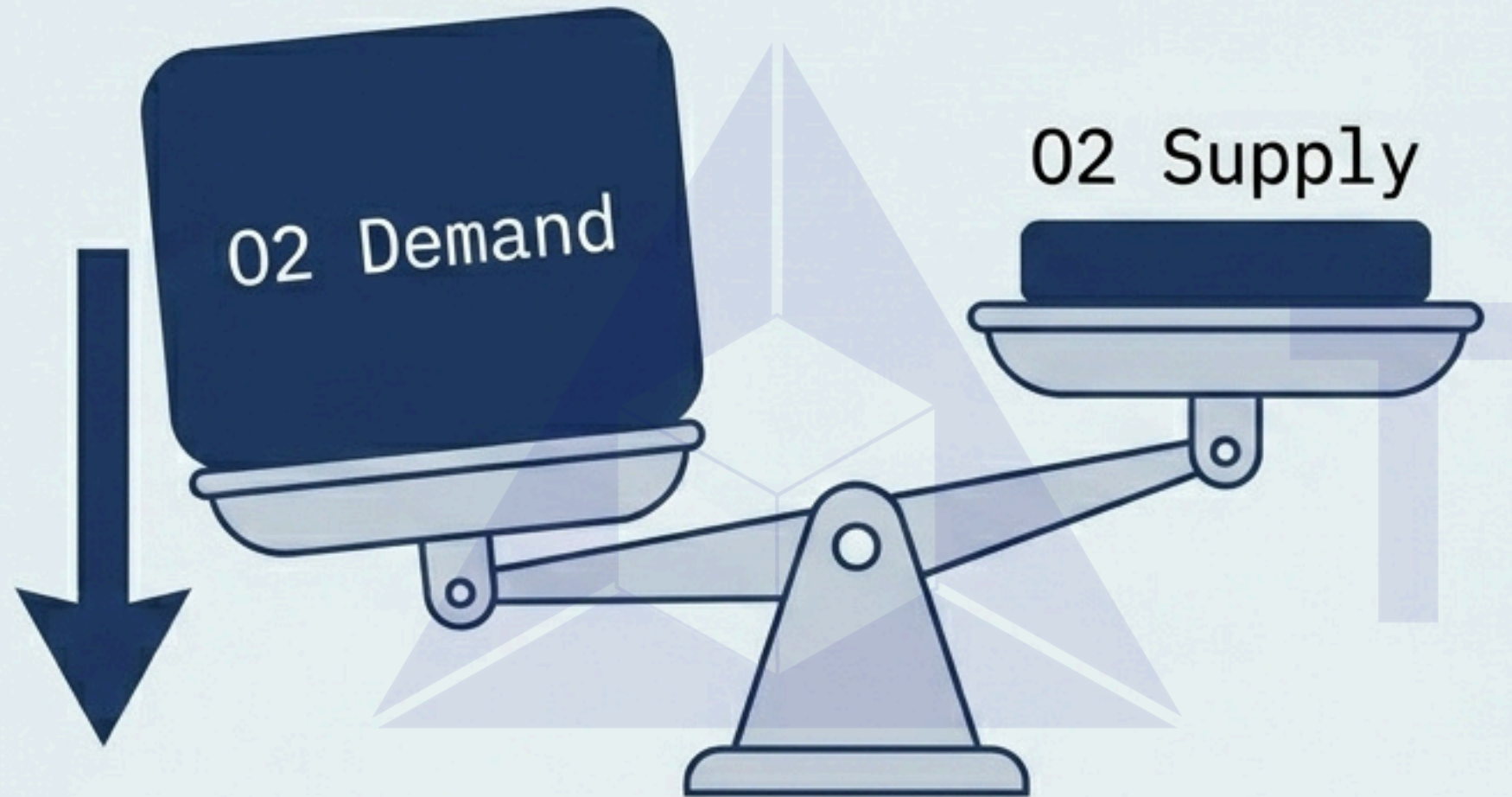
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Coronary Artery Disease (Atherosclerosis)



Angina Pectoris: The Sensory Alarm



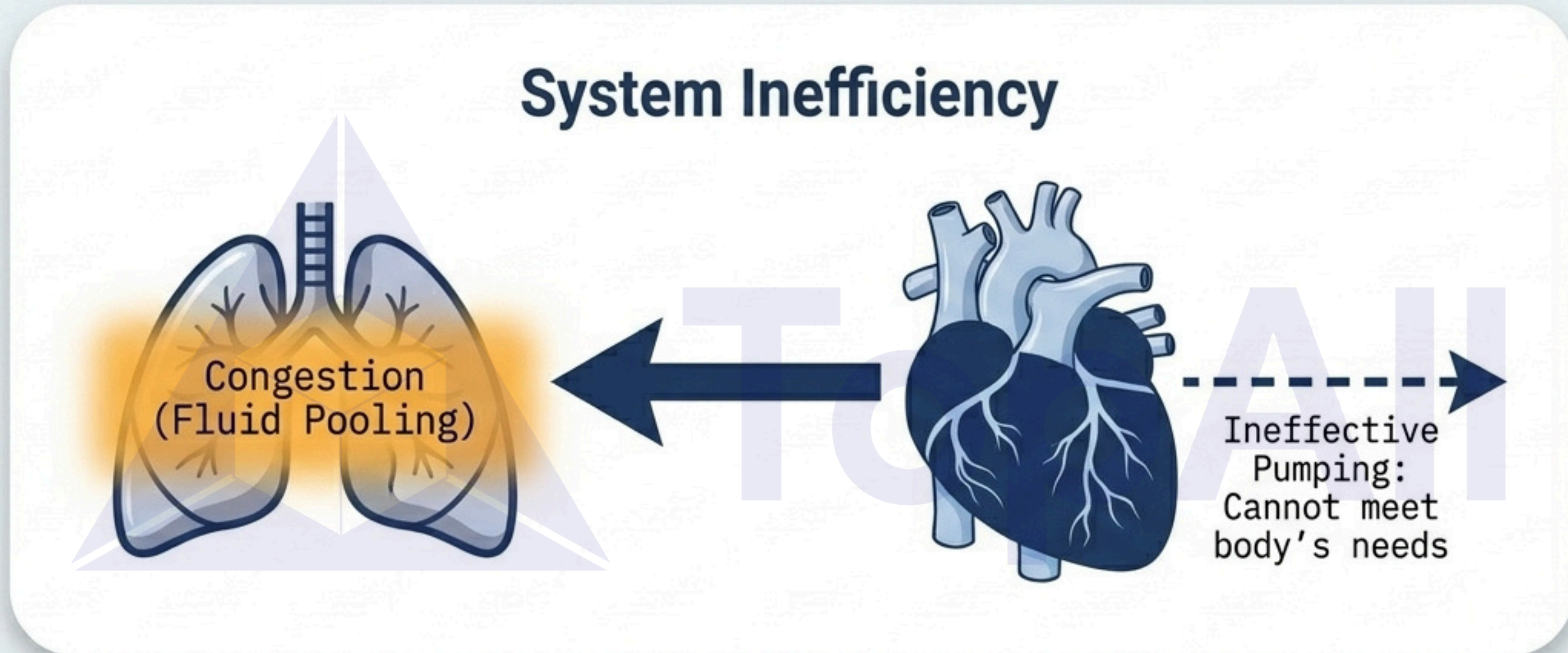
Acute Chest Pain

Triggered when insufficient oxygen reaches the heart muscle due to restricted blood flow.



Can occur at any age, but predominantly common among middle-aged and elderly populations.

Heart Failure (Congestive Heart Failure)



Because the weakened heart cannot pump effectively, blood pools backward, causing fluid congestion in the lungs—hence the clinical term Congestive Heart Failure.

The Diagnostic Matrix: Disambiguating Cardiac Events

Heart Failure



[Mechanical Wear]

The pump is too weak. State of the heart when it is not pumping blood effectively enough to meet the body's needs.

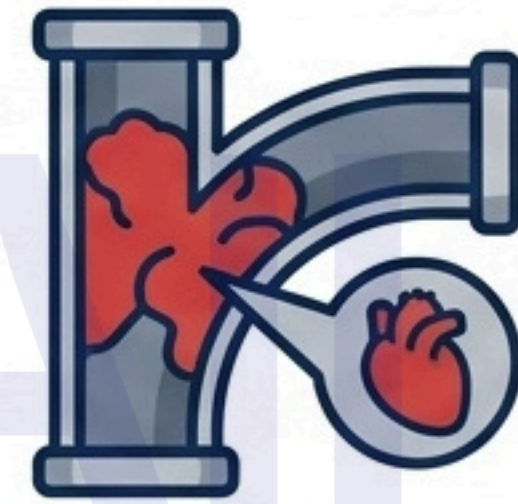
Cardiac Arrest



[Electrical Failure]

The system powers down. The heart suddenly stops beating entirely.

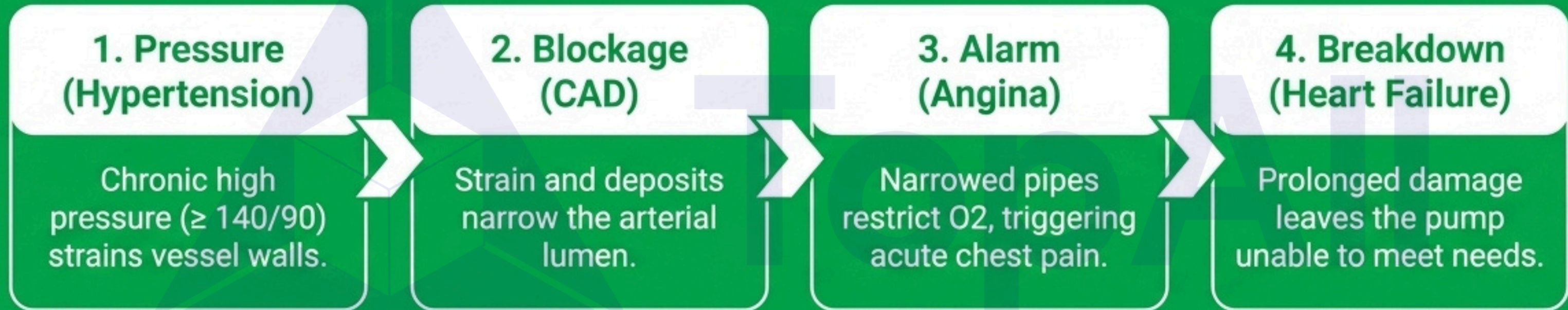
Heart Attack



[Plumbing Failure]

Sudden supply cutoff. The heart muscle is suddenly damaged by an inadequate blood supply.

Key Takeaway: The Cycle of Systemic Strain



Circulatory disorders are rarely isolated events; they are progressive phases of wear and tear on a closed mechanical loop.



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