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by Rr R

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COPD refers to a systematic inflammatory infection that results in strenuous breathing. COPD is characterized by circumscribed airflow, which is not reversible. The conditions that lead to COPD cause damage to air sacs in the lungs. Left ventricular pressure, commonly referred to as left ventricular diastolic dysfunction, is common among patients suffering from severe COPD (Rocha et al. 2019). LVDD as an outcome of COPD severe infection is related to systematic inflammation of the heart by the pulmonary sore. COPD leads to low oxygen supply in the blood, thus exerting extra tension on the heart and deteriorating further the LVDD condition. On the other hand, LVDD leads to fluid accumulation in the lungs, intensifying the complexity of COPD.

Even though COPD and heart failure are distinct conditions, COPD elevates the risk of heart failure (Rocha et al. 2019). In addition, both conditions can simultaneously occur and exacerbate one another and present similar symptoms. Someone previously infected with COOP is more exposed to the risk of heart breakdown. According to Güder & Störk (2019), heart failure is classified into two, either right-sided or left-sided heart failure. The low oxygen levels also cause a spike in blood pressure of arteries present in the lungs. The increase in pressure leads to the extra strain of the heart's right ventricle while pumping blood. As a result, muscles weaken, leading to right-sided heart failure (Güder & Störk, 2019).

References

- Güder, G., & Störk, S. (2019). COPD and heart failure: differential diagnosis and comorbidity. *Herz*, 44(6), 502-508.
- Rocha, A., Arbex, F. F., Sperandio, P. A., Mancuso, F., Marillier, M., Bernard, A. C., ... & Neder, J. A. (2019). Exercise intolerance in comorbid COPD and heart failure: the role of impaired aerobic function. *European Respiratory Journal*, 53(4).

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