



MODERN APPROACHES TO THE MANAGEMENT OF ACUTE HEART FAILURE AND CARDIOGENIC SHOCK IN EMERGENCY MEDICINE

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Cardiogenic shock and acute heart failure represent critical cardiovascular emergencies that require a multidisciplinary, timely, and evidence-based management approach. Cardiogenic shock typically develops as a consequence of myocardial infarction, decompensated chronic heart failure, or mechanical complications, and is characterized by a severe reduction in tissue perfusion and multiorgan hypoperfusion. Contemporary therapeutic strategies focus on early diagnosis using invasive monitoring, optimization of hemodynamic parameters, utilization of mechanical circulatory support devices (IABP, Impella, ECMO), and targeted treatment of the underlying etiology.

Management of acute heart failure involves careful balancing of preload and afterload, administration of diuretic, vasodilator, and inotropic therapy, as well as the integration of novel agents such as levosimendan and sacubitril/valsartan. Recent studies emphasize individualized management based on the patient's hemodynamic profile, early revascularization, and the standardization of care within intensive therapy settings.

The ultimate goal of modern approaches is to improve survival outcomes, preserve organ function, and optimize long-term prognosis.

Keywords: cardiogenic shock, acute heart failure, mechanical circulatory support, modern therapy.