The health and well-being of people today are influenced by many factors that are determining. Studies show that the main risk factors for cardiovascular diseases, often occur in childhood, are relatively stable, since their presence is confirmed by repeated studies conducted in an adult state.

The purpose To evaluate the role of medical-biological factors in the development of cardiomyopathy in children

Materials and methods The study involved 86 patients with diagnoses of hypertrophic, dilatation and restrictive cardiomyopathy, who were hospitalized in the cardio-rheumatology department of the Republican Specialized Scientific and Practical Medical Center of Pediatrics, the Republican Children’s Multipurpose Medical Center of the Republic of Karakalpakstan. The diagnosis was made on the basis of complaints, anamnesis data (obstetric history of the mother, history of the child’s life and illness, hereditary predisposition, past diseases, nature of the course and duration of the disease), clinical and functional (ECG, EchoCG), laboratory examination methods.

Results The study of biomedical factors contributing to the development of cardiomyopathy in children has shown that the disease is sex-related and is more common in boys (60%). In 10% of patients with CMP, the age of mothers was over 35 years old at the time of birth of this child. Nearly related marriages were registered in 25% of cases, hereditary burden in 7.5% of patients. Studies have shown that one determinant that has a significant impact on the development of the ILC is also the burden of obstetric history of mothers. Thus, the study of obstetric history of mothers indicates the birth of premature babies, the presence of stillbirths, miscarriages in early pregnancy. This pregnancy proceeded against the background of anemia and pre-eclampsia of the first or second half of pregnancy. Most of the mothers suffered from extragenital diseases, among which were more frequent kidney and heart diseases (chronic pyelonephritis and carditis), allergic reactions. The number of mothers who had ARI during pregnancy was 85%. The debut of the disease was associated with sudden cardiac arrest in 3.3% of the child; syncopal state during physical exertion in 6.67% of children and with postponed carditis in 13.3% of children.

Thus, among the biomedical factors that influence the development of cardiomyopathy the most closely related marriage, hereditary predisposition, obstetric history and unfavorable pregnancy, the presence of extragenital diseases in the mother, the age of the mother over 35, and childhood diseases of viral etiology are most significant.