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АКТУАЛЬНІ ПИТАННЯ ВНУТРІШНЬОЇ МЕДИЦИНИ. ВІД КЛІНІЧНИХ ДОСЛІДЖЕНЬ ДО КЛІНІЧНОЇ ПРАКТИКИ

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target cells in terms of relative CD16 + lymphocytes (from $p < 0,001$ and $p < 0,05$). The level of CD25 + lymphocytes indicate a probable early cell activation in the all groups monitoring and activation of inflammation especially in patients with nonalcoholic steatohepatitis with moderate activity (from $p < 0,001$ and $p < 0,05$). It is determines that in the both nonalcoholic hepatic steatosis and nonalcoholic steatohepatitis the increased level of expression in CD95+ peripheral blood lymphocytes is observed, indicating a readiness to cell apoptosis and further progression of nonalcoholic fatty liver disease.

Conclusions. The patients with comorbid course of nonalcoholic hepatic steatosis and nonalcoholic steatohepatitis in combination with the obesity and pathology of biliary tract the authentic increase of the number of the activated receptors on lymphocytes is observed (CD16+, CD25+, CD95+) which according to the increase of the body mass index which is more significant in the presence of the steatohepatitis.

THE USE OF ETHYLMETHYL-DYROXYPIRIDINE SUKGINATE IN COMPLEX THERAPY IN PATIENTS WITH ARTERIAL HYPERTENSION DEPENDING ON RENAL FUNCTION

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Introduction. One of the most common diseases of the cardiovascular system in the world is arterial hypertension (AH). Today, the prevention of damage to «target organs» is important issue. It is well known that hypertension is associated with the development of asymptomatic brain lesions. But not always the control of the blood pressure improve symptoms such as headache, dizziness, confusion, fatigue, low mood, memory loss.

Objectives. The aim of our study was to evaluate efficiency of the use of ethylmethyl-dyroxypridine sukcinat in complex therapy in patients with arterial hypertension depending on renal function.

Methods. The study included 30 patients (mean age $65,2 \pm 6,2$ years) with AH. Patients included in the study on the background of medicamentous correction of AH. To determine the degree of cognitive impairment was used the Montreal scale assessment of cognitive impairment (MoCA). To determine the level of disorders in psycho-emotional sphere we used the hospital anxiety scale (HADS-T) and hospital depression scale (HADS-D). The patients were divided into two groups depending on the level of glomerular filtration rate (GFR). The first group (11 persons) consisted of patients with AH with preserved renal function ($GFR > 90 \text{ ml/min/1,73 m}^2$), in this group to «basic» antihypertensive therapy we added ethylmethylhydroxypridine succinate; the second group (10 persons) – patients with AH with reduced renal

function ($60 \text{ ml/min/1,73 m}^2 < \text{GFR} < 90 \text{ ml/min/1,73 m}^2$), in this group we also added the ethylmethylhydroxypyridine succinate; and patients in the control group (9 people) who received only «basic» therapy of AH.

Results. In the beginning of the study the indicators of anxiety and depression did not vary significantly in all groups. At the end of the study, the changes in the indicators of scales of anxiety and depression demonstrated the reduce the severity of anxiety and depressive disorders in groups where patients received ethylmethylhydroxypyridine succinate. So in the first group the number of patients with subclinical anxiety decreased by 5 (55,56 %) ($p < 0,05$), the second – 5 (62,5 %) ($p < 0,05$), control – 2 (22,22 %) ($p < 0,05$). The number of patients with subclinical depression in the first group decreased by 4 (is 57,14 %) ($p < 0,05$), the second – 4 (50 %) ($p < 0,05$) and in the control group – 1 (12,5 %) ($p > 0,05$). More expressed positive dynamics was observed among patients who in addition to the standard therapy of hypertension patients received the drug containing ethylmethylhydroxypyridine succinate. Special attention was paid to dynamics of indicators of MoCA as the most sensitive in mild cognitive impairment. By the end of the study showed positive trends in main groups: first – +9,12 % ($p < 0,05$), the second +8,92 % ($p < 0,05$), in the control and +1,2% ($p > 0,05$), with significantly more expressed dynamics in patients who took ethylmethylhydroxypyridine succinate.

Conclusions. Ethylmethylhydroxypyridine succinate demonstrated a comparable efficiency in the studied groups, indicating lack of influence of renal function decrease ($60 \text{ ml/min/1,73 m}^2 < \text{GFR} < 90 \text{ ml/min/1,73 m}^2$) to the clinical efficiency of this drug. Ethylmethylhydroxypyridine succinate in addition to the standard therapy of arterial hypertension has demonstrated an additional clinical efficiency: positive dynamics of indicators of psycho-emotional sphere and MoCA level.

TYPE OF RENAL LESION IN HEMORRHAGIC VASCULITIS

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The aim of the work: to conduct a comparison of the nature of renal disease with the clinical course of hemorrhagic vasculitis (HV), to assess the correlation between extrarenal manifestation of disease with morphological features of glomerulonephritis (GN).

Materials and methods. The study included 144 patients with HV (56 % of men and 44 % of women). In 21 patients (12 men and 9 women) with preserving renal function and urinary syndrome it was performed morphological study of renal tissue in their lifetime. As a whole, GN was diagnosed in 65 % of patient population, chronic renal failure I–IV degree – in 17 %, nephrotic syndrome – in 8 %. The morphological class GN was bigger in men.