



"General Medicine" and "Pediatrics". The discipline "Pre – medical aid in extreme situations" is taught during the second year of study. The expected result of the curriculum will be testing students' skills to provide pre-medical aid in case of injuries, wounds and lesions in difficult extreme situations.

To conduct classes on professional training of medical students to provide pre-medical aid in extreme situations the teaching staff of the Department of Disaster and Military Medicine is involved who has passed special training and received appropriate certificates in the Ukrainian Military Medical Academy. To conduct classes for professional training of medical students on the organization of pre – medical aid in extreme situations, on the Department of Disaster and Military Medicine thematic classrooms are created. The classrooms are equipped with stands, visual aids, training military medical sets (combined individual medical kits, dressings, immobilizers, tactical backpacks, etc.), medical mannequins (phantoms, models, simulators) and equipment to watch video (multimedia devices). Classes for professional training of a sanitary instructor in providing pre-medical aid should be easy to understand by the audience, universal and cover basic theoretical principles of providing pre-medical care (25% of teaching time), and also include practical skills (75 % of teaching time). No less than 2/3 of the educational time is assigned to perform practical exercises and training, predict typical situations that are accompanied by wounds, injuries and damages in military conditions using portable sets of educational, military - medical assets and improvised means.

While training medical students in providing pre-medical aid the accent is made on individual training, although practical exercises often requires teamwork. The criterion to evaluate the curriculum of discipline "Pre – medical aid in extreme situations" is assimilation of the knowledge and skills determined by means of the final module test (FMT). The components of the final module test are the test in a written form and the practical part that to estimate practical skills to provide pre medical aid according to the algorithms of completion.

The final task for the instructor (teacher) training medical students to provide pre-medical aid in extreme situations is to teach students how to evaluate independently and quickly an emergency situation, make right decision and use the acquired skills to save not only their own lives and health, but also those people who are affected (injured) as a result of emergency situations.

The curriculum of medical students' professional training in providing pre-medical aid in extreme situations is advisable to work out in a single complex, which helps to create tactical and medical conditions that are close to real emergency conditions during peacetime or military situation.

Chornenka Zh.A.

IMPACT OF MIXED ANXIETY-DEPRESSIVE DISORDERS ON QUALITY OF LIFE IN PATIENTS WITH ISCHEMIC HEART DISEASE

*Department of Social Medicine and Public Health
Higher State Educational Establishment of Ukraine
«Bukovinian State Medical University»*

The main goal of our research was to determine an impact of anxiety-depressive disorders on the course of ischemic heart disease (IHD). We wanted to determine the rates of personal anxiety in patients with ischemic heart disease and anxiety indices due to the gender; to find out the relationship between the duration of ischemic heart disease course and emotional reactions.

We have examined 38 patients with ischemic heart disease (IHD) on the base of the Chernivtsi regional cardiological health center. We involved 10 women (26,3%) and 28 men (73,7%) whose disease had lasted more than three years. In order to evaluate anxiety-depressive manifestations we used the Hospital anxiety and depression scale (HADS) and Integrative anxiety test (IAT) to assess the anxiety rate and structure.

The anxiety rate 49,5 % of patients remains within the normal range, in 38,5% we noticed subclinical anxiety indices and 22% of patients showed a pronounced anxiety. The averaged rate of anxiety among women is higher than in men by 9.5 and 7.3 points ($P < 0,05$) respectively. The study found a link between the duration of ischemic heart disease and existing emotional disorders ($r_s = 0,45$, $p < 0,05$). A high level of personal anxiety was observed in 45.6% of patients in the study group and in 18.7% - in the control one.

The given results allow us to arrive to conclusion that emotional disorders are related to the duration of the course of ischemic heart disease ($r_s = 0,45$, $p < 0,05$); depressive affective disorders are most pronounced in men while the anxiety ones are in women.

Grytsiuk M.I.

MORTALITY STRUCTURE AND RATE DUE TO ISCHEMIC HEART DISEASE AMONG RESIDENTS OF CHERNIVTSI REGION

*Department of Social Medicine and Public Health
Higher State Educational Establishment of Ukraine
«Bukovinian State Medical University»*

The main goal of our research was to give a detailed description of the mortality rate and structure due to ischemic heart disease among residents of Chernivtsi region. We wanted to give a detailed description of the mortality rate due to ischemic heart disease among residents of Chernivtsi region as well as to determine the structure of the direct causes of death due to ischemic heart disease



We have studied medical death certificates, medical cards of outpatients and those of inpatients for all deaths due to ischemic heart disease in the district centers of Chernivtsi region. Among the people who died during this period there were 435 deaths caused by ischemic heart disease

In 2011, the overall mortality rate due to ischemic heart disease among residents of small towns in the region amounted to 32,4 out of 10 000 people; in 2012 – 30,8; in 2013 – 31,8; in 2014 – 36,1; in 2015 – 37,7. The total annual average was 33,7. 59,8% of the deceased were men and 46,2% – women.

Among the direct causes of death due to ischemic heart disease cardiovascular failure occupies the leading place; myocardial infarction rates the second followed by a sudden death as a result of acute coronary insufficiency. Arrhythmias account for just 1,2%.

The given results allow us to arrive to conclusion that among the residents of Chernivtsi region total average annual index constitutes 33,7; the leading place in the structure of direct causes of death in case of ischemic heart disease belongs to cardiovascular failure, heart attack rates the second and sudden death occupies the third place.

Lytvyniuk N.Ya.

THE STRUCTURE OF SICKNESS IN STUDENTS OF CHERNIVTSI MEDICAL COLLEGE ACCORDING TO THE RESULTS OF PREVENTIVE EXAMINATIONS

*Department of Social Medicine and Public Health
Higher State Educational Establishment of Ukraine
«Bukovinian State Medical University»*

The main goal of our research was to study the structure of sickness in students of Chernivtsi medical college during 2 year dynamic examinations. We wanted to evaluate the structure of sickness in students of medical college for nosology forms in dynamics during 2 years.

Reports on medical preventive examinations of 1000 students have been analysed. Disease of gastrointestinal tract (GIT) stand first in the structure of students' sickness – 19.5% (ulcer of stomach – 3.1%, chronic cholecystitis – 2.5%, chronic gastritis – 13.9%). It is followed by respiratory diseases(bronchial asthma – 3.1%, chronic bronchitis – 5.3%, tonsillitis – 4.9%) – 13.3% of cases. Allergic diseases go third – 8.4%, otolaryngological pathology – 7%, gynecological diseases – 2.1% of students and 0.7 of cases of cardiovascular pathology and other diseases. In 2015 the number of diseases of gastro - intestinal tract increased by 3.2% and constitute 22.7% (due to increase in incidence of chronic cholecystitis – (3.7%) and chronic gastritis – (15.9%), allergic diseases increased by 1.2% and constitute 9.6%.

The given results allow us to arrive to conclusion that the overall increase in sickness of students is due to their lower material welfare, health conscience and lack of preventive measures. The health of students for two years deteriorated by certain nosologic forms, which requires the introduction of target measures as to the primary and secondary prevention.

Mandryk-Melnychuk M.V.

BERNARD HALPERN'S ROLE IN THE ESTABLISHMENT OF MODERN ALLERGOLOGY AND IMMUNOLOGY

*Department of Social Medicine and Public Health
Higher State Educational Establishment of Ukraine
«Bukovinian State Medical University»*

The research of inventors' personalities one of which was famous French allergist and immunologist, Hero of France Bernard Naftali Halpern (1904-1978) enables to reproduce the features of the establishment of the medicine in the twentieth century better. His figure is also of interest due to the fact that he was born and grew up in the town Tarnoruda in Podilia (Khmelnysky region).

Bernard was the eighth child in a Jewish family. He was growing up to be a polyglot since his early childhood having an opportunity to learn Polish, Jewish, Russian and Yiddish. In addition, a friend who was a Roman Catholic priest secretly taught the boy Latin, German, French, and mathematics. In 1915 Halpern family were deported to Siberia, Bernard spent two years in a labor camp. Only in 1917 they were able to return to Ukraine. In 1920 during the Jewish pogroms Bernard managed to escape to Poland, where he settled illegally without documents. He received schooling there. Later he opened a visa for France. Bernard first came to Nancy (1925). Then he went to medical school. In order to continue his studies in 1928 he moved to Paris, where he entered the Medical Faculty of the University.

In 1929 he starts to conduct a research in the field of experimental biology in the laboratory of Professor Jean Gotrelet (Gautrelet) at the Faculty of Medicine in the University of Paris. Coming there as an inexperienced young man, Halpern is gradually becoming one of the most promising researchers. In 1932 he received a certificate in general physiology in Paris and started his teaching career in the practical school of higher studies (Groupe Ecole Pratique). He works on the thesis on the issue of the use of snake venom. In 1936 he obtains a doctor's degree. As he had not lived in France for necessary five years to receive French citizenship, B. Halpern could not continue academic career at the university, he went back to the industrial work. In 1937 he began working in the research laboratory of chemical and pharmaceutical company «Rhône-Poulenc» under the guidance of renowned organic chemist, Professor Stephen Marcel Delepina. He becomes the director of Research Center of Immunology in the famous Broussais Hospital. He studied the role of antihistamines («Antergan», «Phenbenzamin», «Phenergan») in the treatment of various forms of allergy. He closely collaborated with Nobel laureate Daniel Bovet and Ernest Forni, who had invented this group of drugs at the