

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



МАТЕРІАЛИ

**104-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького персоналу
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ
06, 08, 13 лютого 2023 року**

Конференція внесена до Реєстру заходів безперервного професійного розвитку,
які проводитимуться у 2023 році №5500074

Чернівці – 2023

location in the alveolar part. Therefore, morphometric values relative to the upper ridge of the alveolar part should not be taken into account in the study. Attention is drawn to the difference in values between the left and right sides, which can be a practical manifestation due to the difference from tooth loss.

Conclusion. A detailed study of the topography of the mandibular canal relative to the buccal, lingual sides or edge of the base of the human mandible using computed tomography and 3D reconstruction models confirmed our need to develop a topographic classification of the mandibular canal for practical use by dentists in toothless patients concerning their age, time of tooth loss and gender.

Proniaiev D.V.

A COMPREHENSIVE STATISTICAL ANALYSIS OF THE MORPHOMETRIC PARAMETERS OF THE INTERNAL FEMALE REPRODUCTIVE ORGANS

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Introduction. In recent years clinical medicine has been approaching to understand more clearly anatomical-physiological peculiarities of age, and apply appropriate methods of diagnostics and treatment. On the basis of the obtained results the stages of a definite structure formation of the internal female reproductive organs are determined by the dynamics of their development as well as by the mechanisms of occurrence of their structural variants.

The aim of the study. Conduct for the first time a comprehensive statistical analysis of the morphometric parameters of the internal female reproductive organs between the objects of the study remote in time (I group – 35 specimens of fetuses deceased during 2017-2019; II group – 105 specimens of fetuses).

Material and methods. The study was conducted on 140 samples of dead fetuses (from 4 to 10 months) without any external signs of anatomical deviations or abnormalities. The materials were distributed into four groups with 20 specimen each according to the age of fetuses from 4 to 10 months. In the process of conducting the given research up-to-date adequate anatomical and morphostatistical method were combined with the estimated probability of the results obtained including macro- and micropreparation under the control of MBC-10 microscope, injection of vessels with further preparation, contrast angiography and morphometry.

Results. Perinatal changes of the uterine shape are observed, a certain shape of the uterine fundus at every stage of the perinatal development is determined. It is confirmed by the determined reliable reverse correlations of average force between the width of the uterine fundus which parameters range from $6,0 \pm 0,21$ mm to $6,4 \pm 1,60$ mm, and parietal-calcaneal length of the fetus.

For the first time, morphometric parameters of the internal female reproductive organs in the group of fetuses, remote in time, were analyzed. The length of the left ovary of present 7-month fetuses ($9,4 \pm 1,06$ mm) and the length of the right ovary of present 8-month fetuses ($12,9 \pm 1,23$ mm) were evidenced to be reliably shorter ($p < 0,05$) than that of the archival specimens ($11,6 \pm 1,87$ mm and $14,7 \pm 1,44$ mm respectively). The width of the left ovary of present 4-month fetuses ($0,9 \pm 0,06$ mm) appeared to be reliably shorter ($p < 0,05$) than that of the archival specimens ($1,2 \pm 0,22$ mm). The thickness of the right ovary of present 7 and 10-month fetuses ($1,8 \pm 0,25$ mm and $3,8 \pm 0,36$ mm) appeared to be reliably smaller than that in the appropriate groups of the archival specimens ($2,3 \pm 0,59$ mm and $4,6 \pm 0,8$ mm respectively). The thickness of the left ovary of present fetuses at the end of the perinatal period is marked to be reliably smaller ($p < 0,05$) than that of the archival specimens ($3,3 \pm 0,36$ mm and $4,2 \pm 0,83$ mm respectively).

Conclusion. Stages of formation of the uterine tube and convolution during the perinatal period of human ontogenesis are described. Changes of their position from the ascending to descending one are confirmed to be associated with a relative delay in growth of their morphometric parameters, which is evidenced by the reliable reverse correlations of an average force found ($r = -0,16$ and $-0,32$) between the length of the uterine tubes and fetal parietal-calcaneal length. Morphometric parameters of the right uterine tube length in the period from 7 to 10 months of the intrauterine development were found to increase from $14,5 \pm 3,77$ mm to $22,4 \pm 3,38$ mm, and

the left uterine tube – from $12,9\pm 3,78$ mm to $21,0\pm 3,38$ mm. The stages of the uterine tube formation are determined – from curved (at the beginning of the fetal period), zigzag and spiraled (in the middle of the fetal period) to the curved spiraled shape (at the end of the fetal period and in neonates). The regularities found are evidenced by the analysis of morphometric parameters of the uterine tubes by means of Mann-Whitney U-criterion, and they are indicative of a reliable difference in their parameters ($p<0,05$) in 8-month fetuses ($16,0\pm 0,79$ mm – of the right uterine tube, $14,9\pm 1,34$ mm – of the left one) and in 9-month fetuses ($22,6\pm 1,51$ mm – of the right uterine tube, $20,8\pm 1,83$ mm – of the left one).

Rak R.O.

RELEVANCE OF THE RESEARCH OF VASCULAR-NERVE FORMATIONS OF THE PELVIS

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Introduction. The study of the topographical and anatomical features of vascular-nerve formations of the pelvis has always been the focus of attention of surgeons of various specialties because one of the most important condition for successful operations is a deep understanding as the structure of organs, as understanding of the syntopy and features of the structure of vascular-nerve formations. The importance of clarifying information about the nerves and blood vessels of the pelvis throughout the entire period of human ontogenesis is undeniable, since their adequate blood supply and innervation is very important for the normal functioning of tissues and organs.

Aim. The study of the topographical and anatomical features of vascular-nerve formations of the pelvis

Material and methods. The topographic and anatomical features of the vascular-nerve formations of the pelvis, their variants of departure from the main trunks, branching and location of small branches are important in practical medicine for successful performance of surgical interventions in children and adults in the field of surgery, gynecology, urology, oncology, and also play very important role for successful diagnosis and treatment of pathology related to vascular-nerve structures (varicose veins of the small pelvis, in particular, hemorrhoidal veins, varicocele, chronic pelvic pain syndrome; effective local anesthesia during childbirth, etc.).

Results. Surgical interventions in the area of the small pelvis are quite frequent, but they are very difficult to perform due to the anatomically limited space and a significant number of structures damage of which can lead to the loss of important functions or even have a fatal outcome. Our literature research shows that the topographical and anatomical features of the vascular-nerve formations of the pelvis are characterized by a variety of topographical positions.

Conclusions. The lack of systematization of information regarding syntopical correlations, variants of the structure of vascular-nerve formations of the pelvis and their interconnections, lack of information regarding their chronological sequence of topographic-anatomical transformations at all stages of ontogenesis determine the need for further scientific research using modern methods of morphological research.

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MORPHOLOGY OF THE THIRD VENTRICLE DURING 13-16 WEEKS OF PRENATAL PERIOD OF HUMAN ONTOGENESIS

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Introduction. Measurement ventricles gives the most information about the degree of development of atrophic processes in the brain, shape, appearance, stages, nature and causes of hydrocephalus. However, to determine the change in these dimensions, it is necessary to compare them values with the norm.

The aim of the study. Examine the peculiarity of the formation of the third ventricle in different ontogenetic periods.