

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ  
ВИЩИЙ ДЕРЖАВНИЙ НАВЧАЛЬНИЙ ЗАКЛАД УКРАЇНИ  
«БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



## **МАТЕРІАЛИ**

**100 – ї**

**підсумкової наукової конференції**

**професорсько-викладацького персоналу**

**Вищого державного навчального закладу України**

**«БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**

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Матеріали 100 – ї підсумкової наукової конференції професорсько-викладацького персоналу вищого державного навчального закладу України «Буковинський державний медичний університет», присвяченої 75-річчю БДМУ (м. Чернівці, 11, 13, 18 лютого 2019 р.) – Чернівці: Медуніверситет, 2019. – 544 с. іл.

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У збірнику представлені матеріали 100 – ї підсумкової наукової конференції професорсько-викладацького персоналу вищого державного навчального закладу України «Буковинський державний медичний університет», присвяченої 75-річчю БДМУ (м.Чернівці, 11, 13, 18 лютого 2019 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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The manifest triglycerideamia has been set in 75,5% patients with the III stage of AH, but only in 46,5% patients with the II stage AH ( $p<0,01$ ) accordingly. The use of ANOVA had not shown a reliable association between TG's level and LV hypertrophy ( $p>0,05$ ), but the dependency of TG level and the type of diastolic dysfunction ( $p<0,01$ ) was set up, especially, the highest level of TG was associated with the III type of dysfunction.

So, it was considered that TG level measuring would be used as the marker of secondary prophylaxis in AH with the need to set the special threshold depending on damage of the target organ.

**Shorikova D.V.**

**FREQUENCY OF ANXIETY AND DEPRESSIVE DISORDERS IN PATIENTS  
WITH CHRONIC HEART FAILURE WITH PRESERVED EJECTION FRACTION**

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Modern life conditions increase emotional stress as well as frequency of psycho-emotional disorders. A number of clinical researches indicate that affective disorders can significantly worsen clinical and functional condition, decrease physical exercise tolerance and have negative influence on treatment compliance in heart failure patients.

In general, the frequency of anxiety-depressive disorders in chronic heart failure (CHF) several times above its frequency in general population. So, these patients should be considered as a separate group with specific treatment and medical care.

The objective of the research was to obtain the anxiety level and depressive disorders in patients with chronic heart failure and their influence on life quality (LQ).

152 patients were examined during our research (85 male and 67 female, the average age was 65,912,8) with NYHA II-III CHF.

To detect and obtain the level of anxiety and depression disorders, Depression (HADS) and Spielberger's scales were used, for LQ Minnesota Living with Heart Failure Questionnaire (MLHFQ) was used.

According to the total index of HADS and Spielberger's questionnaires anxiety and depressive disorders were revealed in 121 (79,6%) patients, 28 (18,2 %) of them had isolated anxiety, 32 (21,1%) had isolated depression, and 61 (40,1%) had both anxiety and depression. The frequency of anxiety and depressive disorders among females was higher than in males (92,5 vs 82,3%,  $p<0,05$ ).

According to Spielberger's scale of anxiety disorders were found in 50,7% patients, 68 (44,7%) of them had levels of both reactive and personal anxiety of moderate degree, 4 (2,6%) had moderate personal and high reactivity, 1 (0,6%) had low personal and moderate reactivity, and 5 (3,3%) had high both personal and reactive anxiety. The MLHFQ score at patients with anxiety and depression disorders was 39,411,8 vs 63,811,2 at patients with anxiety disorders ( $p<0,01$ ).

Thus, the anxiety and depression disorders in patients with CHF have a high frequency and are more often found in female, the disorders associated with a significant decrease in LQ, the most significant of its deterioration is observed in the combination of anxiety and depression.

**Shuper V.O.**

**THE ERYTHROCYTES' FUNCTIONAL CHARACTERISTICS  
IN PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASES,  
COMBINED WITH ISCHEMIC HEART DISEASE**

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The number of patients with chronic obstructive pulmonary disease (COPD) is steadily increasing throughout the world. One of the reasons for unsatisfactory results of treatment is co- and



poly-morbidity of this disease. Persons, who continued to suffer from COPD, die from serious complications from the vital systems of the body, most often it occurs from the side of the cardiovascular system. The state of microcirculatory processes in bronchoobstructive diseases is important in the processes of tissues organism oxygenation. The transport of oxygen is carried out by red blood cells, while moving through microvessels. The ability of erythrocytes to move along the capillaries provides the membranes fluidity of the red blood cells.

The objective of the research was to determine the size and sorption capacity of erythrocyte membranes in patients with chronic obstructive pulmonary disease (COPD) combined with ischemic heart disease (IHD).

87 patients with acute COPD exacerbation of clinical group B (GOLD II) associated with IHD made up the main group, as well as 32 patients with COPD without signs of IHD (the 1st group of comparison) and 29 patients with IHD, stable angina of the II functional class (the 2nd group of comparison) were the subjects of the research. 25 healthy donors of the same age and gender range were screened for the development of the reference standards. Diagnosis of COPD, IHD, pulmonary (LF) and heart failure (HF) were established in accordance with the current normative documents. In all examined patients, the mean corpuscular volume of erythrocytes (MCV) (using the Sysmex (Japan) K-1000 analyzer) and sorption capability of their membranes (SCME) (using the methodology of Togaybaev A.A. and co-authorship (1988)) were determined.

The estimation of MCV showed that in all subjects the sizes of erythrocytes did not differ significantly from the reference values; however, in persons of the main group with the II degree of LF, they were significantly lowered by 9.5% ( $p < 0.05$ ) comparing with the similar index of patients with the I degree of LF. The SCME of the patients from the main group was the highest - in 1.3 times ( $p < 0.01$ ) exceeded the reference norm and in 1.13 times ( $p < 0.05$ ) - a similar indicator of persons of the comparison group of with non-significant changes of SCME in patients from the 2<sup>nd</sup> group of comparison. Analyses of SCME changes in patients from the main group, depending on the LF degree revealed the highest level of that parameter in patients with the II degree of LF. Increasing of SCME becomes an indicator of rigidity of red blood cell membranes, which limits their mobility in microvessels.

Thus, in patients with COPD, combined with IHD, along with absence of significant changes in the sizes of erythrocytes, the increase of the sorption capacity of their membranes was observed, which depresses cell's ability to deform while moving through capillaries. However, an increased size of erythrocytes and significant rise of SCME were revealed depending of the increasing degree of LF. The indicated changes of the MCV and SCME contribute to decrease of cells' membranes fluidity and suppression of their microcirculation rate, reduction of gas exchange rate and acceleration of hypoxia development, and moreover the development of COPD and IHD complications in cases of their co-morbidity.

**Шкарутяк А.Є.**

**СУЧАСНИЙ СТАН ПРОБЛЕМИ УРАЖЕНЬ НИРОК  
ПРИ НАЯВНОСТІ СИНДРОМУ МАЛЬАБСОРБЦІЇ**

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Серед захворювань шлунково-кишкового тракту значуще місце займає кишкова патологія. Найчастіше зустрічаються порушення перетравлення окремих продуктів і функціональні захворювання, хоча в останні роки все частіше діагностуються найбільш важкі запальні захворювання кишечника (ЗЗК). На першому місці за поширеністю стоїть лактазная дефіцит, досягаючи в нашій популяції 15-20%. Захворюваність ЗЗК в середньому по Європі сягає 16 на 100 тисяч, причому за останні півстоліття вона зросла більш ніж в два рази. На сьогодні добре відомі місцеві кишкові прояви цих захворювань, однак палітра ушкоджень далеко не обмежується кишечником.