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# **RESULTS OF MODERN SCIENTIFIC RESEARCH AND DEVELOPMENT**



**PROCEEDINGS OF III INTERNATIONAL  
SCIENTIFIC AND PRACTICAL CONFERENCE  
MAY 29-31, 2021**

**MADRID  
2021**

# **RESULTS OF MODERN SCIENTIFIC RESEARCH AND DEVELOPMENT**

Proceedings of III International Scientific and Practical Conference

Madrid, Spain

29-31 May 2021

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## UDC 001.1

The 3<sup>rd</sup> International scientific and practical conference “Results of modern scientific research and development” (May 29-31, 2021) Barca Academy Publishing, Madrid, Spain. 2021. 675 p.

**ISBN 978-84-15927-33-4**

The recommended citation for this publication is:

*Ivanov I. Analysis of the phaunistic composition of Ukraine // Results of modern scientific research and development. Proceedings of the 3rd International scientific and practical conference. Barca Academy Publishing. Madrid, Spain. 2021. Pp. 21-27. URL: <https://sci-conf.com.ua/iii-mezhdunarodnaya-nauchno-prakticheskaya-konferentsiya-results-of-modern-scientific-research-and-development-29-31-maya-2021-goda-madrid-ispaniya-arhiv/>.*

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# FEATURES OF 24 HOUR ARTERIAL PRESSURE MONITORING IN PATIENTS WITH COMORBID NONALCOHOLIC STEATOHEPATITIS DEPENDING ON THE BODY WEIGHT INDEX

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**Keywords:** nonalcoholic steatohepatitis, metabolic syndrome, arterial hypertension

**Introduction.** Comorbidity of nonalcoholic steatohepatitis (NASH) course and that of metabolic syndrome (MS) whose components are arterial hypertension (AH) and obesity, characterized by high levels of mortality need the search for new methods of diagnosis and treatment. Our objective was to evaluate the features of AH by 24 hour monitoring of blood pressure in hypertensive patients depending on the presence and degree of comorbid obesity and NASH.

**Materials and methods.** The study involved 50 people aged from 35 to 55 years. 25 patients with normal body weight, body mass index (BMI to 24.9 kg / m<sup>2</sup>) were diagnosed with NASH, stage II AH while in 25 patients NASH was combined with first degree obesity and stage II essential AH. Duration of the disease was from 2 to 6 years. The control group consisted of 20 healthy subjects. The obesity diagnosis was made when BMI reached over 30 kg / m<sup>2</sup>.

**Results.** The analysis of systolic arterial pressure (SAP) values in patients with NASH, obesity and AH at night and in the day time indicates the frequent excess of the standard values of SAP at night (by 52.7% versus 32.7% in the day time (p < 0.05)). The variability of SAP was increased in groups with normal weight, but

the maximum values were observed in group with AH,NASHA and obesity (34.5% versus 21.4%).

**Conclusion.** The course of the second stage AH combined with obesity and NASH is characterized by prevailed second stage AH (60,0%), SAP rises mostly at night (by 52,7% versus 32,7% in the day time ( $p<0,05$ )), the variability of SAP is higher in the day time (34,5% ( $p<0,05$ )) with increasing duration of "load pressure" during the day (by 4.1 times ( $p <0.05$ )), monotonous type of the curve and inadequate reduction in systolic and diastolic blood pressure during the night period (predominant «non-dipper» type).