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# ХИСТ

ВСЕУКРАЇНСЬКИЙ МЕДИЧНИЙ ЖУРНАЛ МОЛОДИХ ВЧЕНИХ

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Geetha Sudharsanan A.

**THE USE OF HYPOALLERGENIC MIXTURES IN CHILDREN WITH SIGNS OF ATOPY**Bukovinian State Medical University, Chernivtsi, Ukraine  
Department of Pediatrics and Childhood Infectious Diseases  
(scientific advisor - Ph.D. Marusyk U.)

Question feeding children with clinical manifestations of atopy at impossibility of breastfeeding from a scientific point of view remains controversial. Evaluate the clinical effectiveness of a hypoallergenic diet therapy (HD) products based on the full or partial hydrolysis of serum protein in cow's milk (CMP) in infants with symptoms of atopic dermatitis (AD).

Integrated dynamic, within 2 months of observation conducted in 31 infant that was bottle-fed, had clinical signs of atopic dermatitis. They were distributed on two clinical comparison group. The first (I) group entered 21 patient, which was designed soft hypoallergenic diet therapy blends "HiPP HA1 combiotik" and "HiPP HA2 combiotik" (according to age and severity of manifestations of AD). To the second group (II) included 10 infants who were administered hypoallergenic mix of other manufacturers.

Duration of observation was 2 months. On the main clinical characteristics were comparable groups. AD clinical symptoms were evaluated on a EASI scale (decrease scrip balls indicate an improvement of the child). Following the correction of malnutrition among children in group I mean score on the EASI scale decreased by 2,2 times (from  $12,6 \pm 2,6$  to  $5,7 \pm 0,9$  points ( $P < 0,05$ )), where as in infants group II - is only 1,6 times (from  $3,8 \pm 1,1$  to  $2,3 \pm 0,6$  score ( $P < 0,05$ )). After receiving the HD in group I compared with II, reduced the number of children with signs of moderately AD (EASI total more than 4,4 points). So, in the beginning of the observation points indicated amount was recorded in 85,7% of children in I group and after - only 57,1 % of patients ( $P < 0,05$ ). In II group, the proportion of such patients decreased from 20,0 % to 10,0 % of children ( $P > 0,05$ ). As a result of consistent HD children showed decrease in symptom severity AD  $57,1 \pm 10,8\%$  of cases, where as patients II group - only  $10,0 \pm 9,4\%$  of observations ( $P < 0,05$ ). The relative risk reduction EASI score on a scale of 4,4 points or higher in patients of group versus control was 47,1% absolute risk reduction - 52,3% with a minimum number of patients to be treat to obtain one positive result - 2.

Thus the product "HiPP HA1 combiotik" recommended as a starting formula feeding for children allergic to cow's milk proteins are easy and moderate to anyone under 1 year of age, starting (if necessary) of the first days of life, and for the necessary term to stabilize the clinical effect and subsiding manifestations of atopic dermatitis.

Krecu N., Gnatiuk M., Kuhta O.

**RISK ASSESSMENT OF DYSFUNCTIONAL GROUPS IN PROBLEM-BASED LEARNING SESSIONS IN PROJECT OF MEDICAL ERRORS PREVENTION (TAME)**Bukovinian State Medical University, Chernivtsi, Ukraine  
Department of Pediatrics and Childhood Infectious Diseases  
(scientific advisor - Ph.D. Bogutska N.)

Problem based learning (PBL) in medical education is characterized mostly by advantages as compared to traditional learning approach, but its implementation in pediatric curriculum may be accompanied by not typical for traditional learning problems, provoking group problems and influencing students' achievements. Since 2015 Higher State Educational Establishment of Ukraine "Bukovinian State Medical University" participates in project "Training Against Medical Error" (TAME).

Purpose of the research was the initial evaluation of problems while implementing the project TAME using cases of e-virtual patients (OpenLabyrinth platform) at undergraduate stage. The data of open questioning of 80 students and 10 tutors participating in TAME project were analyzed. A hybrid mixed curriculum of discipline "Pediatrics with Pediatric Infectious Diseases" was designed in order to achieve the learning outcomes in knowledge and practical skills: six PBL pediatric virtual cases (totally 12 PBL sessions) were incorporated in schedule twice a week. For the PBL purposes new 8 hybrid groups were combined of the students from 6 traditional academic groups with number of students from 6 to 10 under leadership of 10 trained tutors-pediatricians rotating within groups. Groups were divided equally for learning branched and linear e-virtual cases. Students of each hybrid group stayed together with each other and with tutor during the session long enough to allow developing of an effective dynamics, approximately 4 hours daily. Students elected different roles for themselves and rotated them for each e-virtual case. Questioning of PBL participants revealed, that students predominantly considered "dominant student's behavior", while tutors - "quiet student" and "absenteeism or lateness" as the most important problems of dysfunctional groups among all proposed choices: lack of commitment, rushes through tutorials, personality clash, shortcuts or disorganized tutorial process, psychosocial factors, frustration, superficial study, bullying. Group dysfunction mostly was caused by too shy and very quiet or ignoring not motivated students, rarely contributing to discussion. Students and tutors mostly were satisfied with hybrid complementary to traditional curriculum, nevertheless some students were complaining of total duration of classes on PBL session days. While choosing further patient's management in branched cases some students considered learning process as stressful causing anxiety or frustration. Managing group problems is available as tutor's intervention during tutorial or feedback outside tutorial.

Thus, training PBL tutors-specialists on students' psychological peculiarities, tutors' rotation within groups, lack of punishment may contribute to avoiding group problems, diminishing dysfunctional groups and improvement of performance in training against medical errors.