

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



## **МАТЕРІАЛИ**

**101 – ї**

**підсумкової наукової конференції**

**професорсько-викладацького персоналу**

**Вищого державного навчального закладу України**

**«БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**

**10, 12, 17 лютого 2020 року**

**Чернівці – 2020**

УДК 001:378.12(477.85)

ББК 72:74.58

М 34

Матеріали 101 – ї підсумкової наукової конференції професорсько-викладацького персоналу вищого державного навчального закладу України «Буковинський державний медичний університет» (м. Чернівці, 10, 12, 17 лютого 2020 р.) – Чернівці: Медуніверситет, 2020. – 488 с. іл.

ББК 72:74.58

У збірнику представлені матеріали 101 – ї підсумкової наукової конференції професорсько-викладацького персоналу вищого державного навчального закладу України «Буковинський державний медичний університет» (м.Чернівці, 10, 12, 17 лютого 2020 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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ISBN 978-966-697-843-4

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Thus, as a result of the analysis was performed between the reduction of nonspecific protection and complication after traumatic injury of the small intestine. Joining postoperative multi organ failure syndrome increases to 35.72% incidence of complicated course of small intestine trauma. The suggested algorithm enables to improve the prediction of postoperative course and to detect preclinical stage of formation of complicated course.

**Marchuk O.F.**

**ON SOME PECULIARITIES OF DIAGNOSING AND TREATING RECURRENT  
TRANSITORY SYNOVITES IN CHILDREN**

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Transitory synovites may be caused by different etiological factors and have the following clinical manifestations at the initial stage: pain when moving hip joints, restriction of the lower limbs functions, fever, and local inflammatory changes. Consequently, it is very essential to determine the basic etiological factor at the initial stage of the disease, since it may considerably improve the initial treatment, as well as significantly reduce the possibility of relapses because recurrent clinical manifestations occur in only a third of the patients. Quite often children suffer from worm contamination, which may lead to various types of disease complications.

The objective of the investigation under discussion is to optimize the coxitis diagnostics in children with concomitant helminth infestation (ascaridosis, toxocariasis), using enzyme-linked immunosorbent assay (ELISA) for relapses of transitory synovitis, as well as to identify the major difference in diagnostic criteria.

From 2016 to 2018, 245 children were cured in the Department of Pediatric Traumatology of the OKU Hospital of Emergency Medicine in Chernivtsi, with 135 boys and 110 girls diagnosed "coxitis". The average age of the patients was  $5.0 \pm 2.3$  years old. According to our observations, transitory synovitis is marked with acute onset and rapid development. The child finds it difficult to move his/her joint. What is more, he/she is constantly trying to fix his/her leg in a sparing position. Such children usually limp and have pains in their joints when palpated. Besides, a third of them suffer from relapses. Based on a survey of 67 patients in 45 cases, the presence of helminth infestation – ascarids and toxocars – was detected by ELISA. In 25 patients with concomitant helminthiasis, in addition to standard treatment, anthelmintic drugs were administered at the age doses envisaged by the treatment protocols (Group I). The other 20 children (Group II) received only standard treatment for the underlying disease. In patients of Group I, the average duration of treatment was 5.2 days. Patients experienced improvement after about 2 days of treatment. Patients in Group II had generally worse rates than children in Group I: the average duration of treatment was 7.3 days, which is 29% longer than in children of group I. The recovery was 15% slower than in Group I children. In addition, the frequency of recurrence, within 3 months of observations, was significantly higher in Group II children (47%) compared to Group I children (19%).

Thus, the complex treatment with the application of anthelmintic drugs in the presence of concomitant parasitic contamination of the organism, confirmed by the ELISA method, has allowed to reduce the duration of the disease and to minimize the presence of relapses in this category of children.

**Raylyanu S.I.**

**HERNIA TISSUES MORPHOLOGY IN PATIENTS WITH CHRONIC INGUINAL  
HERNIAS**

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During last years the incidence of inguinal hernias grew significantly. The complications development in these patients after inguinal hernioplasty reached 6-18%. It can be explained by the



fact that during surgery and postoperative period surgeons don't take all the aspects of complications pathogenesis in elderly patients into consideration.

Objective of the study was to evaluate the morphological changes of hernia sac and hernia-surrounding tissues with inguinal hernias.

For the research purpose we used bioptates of hernia tissues of 24 patients (aged 60-83, mean  $67.47 \pm 2.54$  yrs.), obtained during the inguinal hernioplasty. Special attention was paid to evaluation of the muscular tissue atrophy and development of cicatrize and inflammatory changes. The following tissues were evaluated: hernia sac, subcutaneous cellular tissue, muscular tissue and, in some cases, preperitoneal cellular fat. Fragments of tissues were preserved and processed in accordance to histological standards.

Principal signs of chronic inflammation of the hernia sac in all 24 patients were studied. In 8 (33.3%) patients isolated inflammation of hernia sac tissues were found, and in 16 (66.7%) patients it was associated with chronic inflammatory changes of hernia-surrounding tissues. In 6 (25.0%) patients with the recurrent inguinal hernias the inflammatory changes of hernia sac and hernia-surrounding tissues were very pronounced and associated with their cicatrize changes. In all patients pronounced atrophic changes of the muscular tissue were determined. Use of 'suture-free' techniques in elderly patients may greatly reduce inflammatory changes impact on healing, though not providing complete protection.

Inflammatory and cicatrize changes after the suture methods of hernioplasty cause ischemia, atrophic and cicatrize changes in muscles during postoperative period, making these methods of surgery not sufficiently effective.

**Rotar O.V.**

## **INTESTINAL OXIDANT STRESS AND ANTIOXIDANT DEFENCE DURING ACUTE PANCREATITIS**

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Infection of pancreatic necrosis by gut bacteria is a major cause of morbidity and mortality in patients with acute pancreatitis (AP). Bacterial translocation occurs due to increase of intestinal permeability as a result of disorders of intestinal metabolism.

The objective of the study was to investigate the changes in pro- and antioxidant metabolism in the small intestine (SI) during early stages of experimental AP and their influence on proteolytic activity in tissues.

In 70 Wistar rats AP was induced by intraperitoneal injection of 300 mg/100 g of 20% L-arginine solution. Changes of pro- and anti-oxidative status and proteolytic activity in SI have been investigated during first 48 hours of AP.

AP was accompanied by activation of oxidant stress. Concentration of diene conjugates, malone dialdehyde and nitric oxide metabolites increased 12 hours after AP initiation and reached maximum in 24 hours: levels exceeded values of intact rats 22%, 10% and 18% accordingly ( $p < 0,05$ ). Their neutralization occurred after 48 hours as a result of activation of antioxidant defense: superoxide dismutase and the catalase concentrations has been raised 1,6 and 1,7 times ( $p < 0,05$ ). Under influence of oxidant stress collagenolytic activity raised 1,5 times 12 hours later and remained high until the end of the experiment.

Considering received data we made conclusion that oxidant stress activates collagenolytic activity and destroy structure of proteoglycans and glycoproteins in the small intetinal tissues during early phase of AP.