99-а підсумкова наукова конференція професорсько-викладацького персоналу БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ



3 patients with fractures of the metatarsal bones, 7 patients with Hallux Valgus. The external immobilization after osteosynthesis with metal and polymeric screws was kept for 5-6 weeks after surgery with orthoses or plaster cast bandages. Patients, who were operated with LCP plates, were treated without plaster bandage. Biodegradable ActivaScrews were used for internal fixation of tibial condyle fractures, malleolus, metatarsal shaft and base fractures, bone fixation after osteotomy for Hallux Valgus. Osteosynthesis with biodegradable pins was performed in patients with fractures of the lateral malleolus, metatarsal bones, and fixation of osteotomies for Hallux Valgus.

The results of treatment were followed within 3-28 months. In 15 patients, where polymeric fixing devices were used, the good results were achieved. The results in case of the patient with complicated ankle fracture-dislocation and developed osteoarthritis were considered to be satisfactory. No foreign body reactions or other adverse effects were found. In 97,8 % cases after internal fixation with metal devices the results were good and satisfactory. The secondary displacement, as a result of shot immobilization period, developed in one patient, who was operated with screws and wires. Among other complications was superficial site infection in two cases, that later were successfully treated.

Biodegradable polymer fixators allowed achieving proper fixation of avulsion, marginal and intra-articular fractures. The terms of fracture healing were similar to those patients who had undergone osteosynthesis with metal devices. During the whole period of follow-up we have not seen any local allergic or inflammatory reactions in the areas where biodegradable fixators were used.

Fedoruk O.S., Vizniuk V.V., Zaitsev V.I., Ilyuk I.I., Stepan V.T., Vladychenko K.A., Shyrokyi V.S. NEPHROPROTECTION THERAPY OF PATIENTS SUFFERING FROM BENING PROSTATE GLAND HYPERPLASIA

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Morbidity of bening prostate gland hyperplasia (BPH) occupies the third place after urolithiasis and heterospecific inflamantary diseases in the structure of diseases of urology profile. BPH is the most widespread disease among men of elderly and senile years, which determines quality of their life. However the characteristic complex of symptoms, clinical signs and macrostructural changes in the prostate gland develope rarely enough and depend on the stage of the disease (only 40-50 % men at the age of 50-64 have symptoms of the disease).

The functional state of kidneys has an important value to choose the tactics and method of treatment, and influences on the treatment of the disease considerably. For patients suffering from BPH in I-II stage of the disease the onset of cronic kidney failure is diagnosed in most cases, but pronounced clinical symptoms are not, as the passage of urine depends on retractive possibility of the urinary bladder detrusor.

To provide highly effective nephroprotection therapy the basic links of physiopathological mechanisms should be considered, which are found in kidneys in case of obstructive uropathies. It results in underlying universality of pathogenetic mechanisms of kidney parenchyma damage without substantial dependence on aetiologic factors. In the last few years single scientific reports have appeared concerning nephroprotection action of angiotensin transforming enzyme inhibitors, calcium channel blockers, L - arginine.

Nephroprotection action of these groups of preparations consists of elimination of disorders of lipid peroxidation, microvascular circulation of blood and improves antioxidant properties of the organism.

A great number of medicinal preparations of different action targeted at treatment of BPH is indicative of the fact that none of these medications is effective enough with monotherapy, that is why there is a necessity to introduce a complex therapy of kidney parafunctions.

Grynchuk A.F. NEW DIAGNOSTIC METHOD OF PERITONEAL CAVITY ACUTE SURGICAL DISEASES

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The treatment tactic of patients with acute surgical pathology of the abdominal organs essentially depends on its nature, but, at the same time, in some cases, the differential diagnosis of certain diseases is quite complicated. It is determined by the lack of specific laboratory criteria and informative instrumental research methods, which requires the search for new means. The attention is drawn to diagnostic methods based on the determination of the blood plasma optical characteristics which allow to detect inflammatory and destructive processes in the peritoneal cavity. However, the information about the application of such methods for the purpose of various diseases differentiation is absent.

The aim of the study was to investigate the possibility of acute surgical abdominal diseases differentiation by the blood plasma optical properties determination.

34 patients with destructive forms of acute diseases, including 15 cases of cholecystitis, 11 - appendicitis, 5 - irreducible hernia and 3 cases of perforated gastroduodenal ulcers, were examined. All patients have had surgery. After the hospitalization, patients had 2 ml of venous blood taken by the puncture of cubital vein. The determination of the blood plasma luminescence spectra was carried out, for which it was irradiated with a monochromatic laser beam by an argon laser LGN-503. Blood plasma of healthy donors was used for control measurements. During check measurements in the blood plasma luminescence spectra a characteristic intensity maximum was found at the wavelength of λ = 474 nm.