

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



МАТЕРІАЛИ

**105-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького персоналу
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ
присвяченої 80-річчю БДМУ
05, 07, 12 лютого 2024 року**

Конференція внесена до Реєстру заходів безперервного професійного розвитку,
які проводитимуться у 2024 році № 3700679

Чернівці – 2024

УДК 001:378.12(477.85)

ББК 72:74.58

М 34

Матеріали підсумкової 105-ї науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) – Чернівці: Медуніверситет, 2024. – 477 с. іл.

ББК 72:74.58

У збірнику представлені матеріали 105-ї підсумкової науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

Загальна редакція: професор Геруш І.В., професорка Грицюк М.І., професор Безрук В.В.

Наукові рецензенти:

професор Братенко М.К.

професор Булик Р.Є.

професор Гринчук Ф.В.

професор Давиденко І.С.

професор Дейнека С.Є.

професорка Денисенко О.І.

професор Заморський І.І.

професорка Колоскова О.К.

професор Коновчук В.М.

професор Пенішкевич Я.І.

професорка Хухліна О.С.

професор Слободян О.М.

професорка Ткачук С.С.

професорка Годоріко Л.Д.

професор Юзько О.М.

професорка Годованець О.І.

ISBN 978-617-519-077-7

© Буковинський державний медичний
університет, 2024

Honcharuk L.M.

**PATHOGENETIC TREATMENT OF HELICOBACTER PYLORI-NEGATIVE
GASTRODUODENOPATHIES INDUCED BY NON-STEROID ANTI-INFLAMMATORY
DRUGS IN PATIENTS WITH OSTEOARTHRITIS**

Department of Internal Medicine

Bukovinian State Medical University

Introduction. The treatment of gastroduodenopathy (GDP) induced by nonsteroidal anti-inflammatory drugs (NSAIDs) in patients with osteoarthritis (OA) is a rather complex and urgent problem, since the withdrawal of NSAID treatment as the main cause of GDP in these patients is impossible due to the exacerbation of the underlying disease. With the study of the mechanisms of side effects of NSAIDs, new approaches to the treatment of damage to the stomach and duodenum under the influence of these drugs were developed.

The aim of the study. There was a comparative assessment of the effectiveness of pathogenetic treatment using proton pump inhibitors (PPIs), rebamipide and amlodipine in *Helicobacter pylori* (Hp)-negative GDP induced by NSAIDs in patients with OA.

Material and methods. Patients with Hp-negative GDP caused by NSAIDs were divided into the following groups according to the treatment scheme: Group I - 24 patients with OA with concomitant Hp-negative GDP caused by NSAIDs received PPIs (rabeprazole 20 mg twice a day, within 28 days). Group II - 23 patients who, in addition to PPIs, received rebamipide 1 tablet (100 mg) three times a day for 4 weeks. Group III - 9 patients with Hp-negative NSAID-induced GDP who received rabeprazole 20 mg twice a day, rebamipide 1 tablet (100 mg) 3 times a day and amlodipine 1 tablet (5 mg) a day for 4 weeks. The presence of Hp was determined by invasive rapid diagnosis of infection based on the urease activity of the biopsy obtained during endoscopic examination. The content of products of peroxidation of lipids (POL) - malonaldehyde - in blood plasma (MA pl) and erythrocytes (MA er), oxidative modification of proteins - neutral aldehyde and ketone dinitrophenylhydrazones (AKDNFH NH), the content of ceruloplasmin (CP), reduced glutathione (GV), activity of glutathione peroxidase (GP) and glutathione-S-transferase (GT), total antioxidant activity (TAA) of blood plasma was determined by the amount of formed malonaldehyde.

Results. In all patients with Hp-negative GDP induced by NSAIDs, a decrease in the intensity of free radical oxidation processes and an improvement in the indicators of the antioxidant system were observed after treatment. Against the background of taking rebamipide, more significant changes were noted, amlodipine did not worsen the effect of rebamipide. In particular, the levels of MA pl., MA er. and AKDNFH NH significantly decreased in the II group by 32.1%, 24.2% and 43.8%, respectively. In the 1st group, these indicators decreased by 15.4%, 12.7% ($p < 0.05$) and 19.4% ($p < 0.05$), respectively. In patients who additionally received rebamipide and amlodipine, the intensity of oxidative stress also significantly decreased, but these changes were almost no different from the indicators of the II group. The glutathione system during treatment with rebamipide significantly improved compared to standard therapy. The level of GV in patients receiving PPIs increased by 10.6% ($p < 0.05$), GT and GP decreased unreliably. In patients who additionally received rebamipide, the level of GV increased significantly by 31.4%, GT and GP decreased by 17.0% ($p < 0.05$) and 10.9% ($p < 0.05$). TAA significantly increased in the group where patients received rebamipide (by 26.1%) compared to the group of standard therapy, where this indicator increased only by 10.9% ($p < 0.05$). CP decreased in the main groups by 20.5% and 25.3%, respectively, which was more effective than in the control group.

Conclusions. The use of rebamipide and amlodipine in the complex treatment of gastroduodenopathies induced by non-steroidal anti-inflammatory drugs in patients with osteoarthritis is pathogenetically justified, as it helps to improve the state of oxidant-antioxidant homeostasis.