

**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
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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.

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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.

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

Kozlovska I.M.

EXPERIENCE OF ABSORBENT WOUND-HEALING DRESSINGS USAGE IN PATIENTS WITH TROPHIC ULCERS

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Introduction. Trophic ulcers, especially amid ischemia, chronic lympho-venous insufficiency and in the presence of microbial contamination, resistance to antibiotic therapy, slow regenerative processes, have a low prospect of healing and require long-term hospital treatment, a large number of consumables, daily dressings. Therefore, this pathology still remains an important and relevant problem of a modern surgery.

The aim of the study. To improve the results of patients' treatment with trophic ulcers by using wound-healing sorbent dressings and comparing their effectiveness with conventional dressings.

Material and methods. The results of 47 patients with trophic ulcers who were treated in the Surgical Department No.1 of the Chernivtsi Emergency Hospital during 2021-2023 were studied. The cases were divided into two follow-up groups. The main group (n=24) included patients who used absorbent bandages in the treatment of trophic ulcers, and the comparative group (n=23) included patients to whom original gauze dressings were applied. The groups of patients were similar according to the age, condition and comorbidity of pathologies. We used absorbent dressings in the exudation, proliferation and regeneration phases of the wound process. The dressing was replaced once every 3 days when exudate was detected in the wound or once every 4-5 days during the regeneration stages.

Results. It was possible to reduce the duration of the exudation and proliferation phase significantly, accelerate the growth of granulation tissue and all stages of wound regeneration in the main group. Thus, the average duration of the exudation phase in the main group was 7.31 ± 0.73 days, and in the comparative group 13.58 ± 1.72 days, respectively, the average duration of the proliferation phase was 10.48 ± 1.42 against 20.08 ± 1.97 days. During the first dressings, it was already noticeable that thanks to the absorbent dressings, during the first treatment week, it was possible to stop the formation of exudate in the wound almost completely, to activate the growth of granulation tissue, and to reduce the depth and total area of the wound after the first 2-3 dressings. It was also possible to speed up and activate the marginal epithelization of the trophic ulcer from the second treatment week. Since dressings were performed once every 3-5 days, we reduced the frequency of painful and uncomfortable dressings for the patient, increased the workload of the medical staff, lowered the average treatment duration significantly and, accordingly, the cost of wound care in patients of the main group. It was also possible to minimize pain syndrome and injury to the wound surface during dressing changes, in contrast to patients who used gauze dressings. According to the visual-analog scale, the level of pain at admission did not differ significantly in both groups and was 6.92 ± 1.2 points, on the 3rd day in the main group 4.59 ± 0.8 points, in the comparative group 6.58 ± 1.1 points, on the 6th day – 3.31 ± 0.7 points and 5.72 ± 0.9 points, on the 9th day – 1.05 ± 0.3 points and 4.36 ± 0.7 points, respectively. The average duration of inpatient treatment in the main group was 20.36 ± 1.73 days, in the comparative group – 38.08 ± 2.24 days.

Conclusions. The use of modern absorbent dressings is justified and recommended for the treatment of trophic ulcers of any etiology economically and clinically, as it shortens all the terms of the wound process significantly, accelerates the transition to each subsequent phase of the wound process, shortens the duration of treatment several times and improves the healing efficiency of trophic ulcers markedly.