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

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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.

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

Наукові рецензенти: професор Братенко М.К. професор Булик Р.С. 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 Тодоріко Л.Д. професор Юзько О.М. професорка Годованець О.І.

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Kolotylo T.R. CHANGES IN IFN-γ IN COMBINED HIV/TB PATHOLOGY

Department of Infectious Diseases and Epidemiology Bukovinian State Medical University

Introduction. The determination of interferon gamma (IFN- γ) in HIV-infected patients with suspicion of tuberculosis is extremely important, because with the help of the quantiferon test, which is based on the determination of IFN- γ , it is possible to establish a latent tuberculosis infection when there are still no clinical manifestations of tuberculosis. This makes it possible to prescribe appropriate therapy to such patients in a timely manner.

The aim of the study is to carry out a comparative analysis of IFN- γ indicators in groups of patients with HIV infection combined with tuberculosis (TB) and TB mono-infection.

Material and methods. A comprehensive immunological examination of 231 patients was carried out, including 155 HIV-infected patients with active tuberculosis detected for the first time and 76 only for tuberculosis. The HIV/TB group was divided into 3 subgroups depending on the time of joining TB to HIV infection. IFN- γ levels were compared for groups with combined HIV/TB infection and patients with TB mono-infection.

Results. We analyzed the results of the study of the level of cytokines - serum concentration and spontaneous production of IFN- γ in the groups of HIV/TB and patients with only TB. Simultaneously with the study of the cytokine level, the HIV load in patients with various forms of TB was also determined. Differences were observed in different forms of TB. Thus, with focal TB, the serum concentration of IFN-y was lower in combined HIV/TB infection than in TB monoinfection - (24.2±8.9) pg/ml versus (50.6±9.4) pg/ml ml (p<0.05). VL (viral load) HIV was the lowest - (33115 ± 9896 kopecks/ml). With caseous pneumonia, the spontaneous production of IFN- γ in the group of patients with combined HIV/TB infection also exceeded the corresponding indicator in patients with only TB - (90.7 ± 32.6) pg/ml/106 versus $(7.3\pm1, 1)$ pg/ml/106 (p<0.001). The HIV concentration was kept at a moderate level - (92450±22890) kopecks/ml. In the case of PCT, the level of serum concentration of IFN-y in the HIV/TB group was also significantly higher -(177.6±40.2) pg/ml versus (14.6±2.7) pg/ml (P<0.001). VL HIV remained moderately elevated -(94880 \pm 18472) cop./min. In disseminated TB, the spontaneous production of IFN- γ in patients with associated infection was (16.9±3.4) pg/ml/106, which significantly exceeded this indicator in TB monoinfection – (4.2±0.7) pg/ ml/106 (p<0.001). With extrapulmonary TB, the level of IFN- γ serum concentration was significantly higher in the HIV/TB group - (286.1±70.8) pg/ml compared to the group of patients with only TB - (71.7 ± 8.2) pg/ml (p<0.001).

Conclusions. In general, the serum concentration of IFN- γ was significantly higher in the HIV/TB group than in TB monoinfection - (168.6±41.7) pg/ml versus (79.4±15.3) pg/ml, respectively.

Perepichka M.P.

COMPREHENSIVE TREATMENT OF PATIENTS WITH ROSACEA CONSIDERING THE CONDITION OF THE ORGANS OF THE HEPATOBILIARY SYSTEM AND THE CLINICAL MANIFESTATIONS OF DERMATOSIS

Department of Dermatovenerology

Bukovinian State Medical University

Introduction. An urgent problem of modern dermatology is rosacea - a widespread chronic dermatosis, which is registered in 3% - 5% of the population of Ukraine. Clinical manifestations of rosacea are localized on open areas, first of all the skin of the face. It negatively affects the psychoemotional state of patients, reduces their ability to work and social activity. Rosacea is found to be a multifactorial dermatosis, in the pathogenesis of which vegetative dysfunctions, disorders of neuroendocrine regulation, changes in skin microcirculation, as well as diseases of the hepatobiliary system are important. This should be taken into account during the examination and treatment of such patients. According to clinical observations, rosacea at the current stage has a tendency to a severe clinical course, resistance to the means of standard therapy, which substantiates the importance of improving the treatment of this group of patients.

The aim of the study. Increase the effectiveness of treatment of patients with rosacea, considering the condition of the organs of the hepatobiliary system of patients and the clinical manifestations of dermatosis.

Material and methods. 57 patients with rosacea aged from 28 to 71 years, including 42 women and 15 men, were under observation. According to the clinical manifestations on the skin, 25 patients were diagnosed with the erythematous-telangiectatic form of rosacea, and the other 32 patients with the papulo-pustular form of dermatosis. The functional state of the organs of the hepatobiliary system was studied in patients using laboratory (biochemical, immunoenzymatic) research methods and ultrasound examination of the organs of the hepatobiliary system.

Results. As a result of the examination of patients with rosacea, diseases of the hepatobiliary system were found in a large part - 42 (73.7%) of them. These were chronic cholecystitis, hepatitis of non-viral etiology, etc., which were manifested by changes in the indicators of the biochemical blood test and ultrasound examination of the liver and gallbladder. Taking into account the clinical manifestations of rosacea on the skin (persistent erythema, numerous telangiectasias) and the detected changes in the organs of the hepatobiliary system, in order to increase the effectiveness of rosacea treatment, 29 patients (the main group) were additionally prescribed an angioprotective drug containing bioflavonoids - diosmin and hesperidin and a hepatoprotective drug containing silymarin. The remaining 28 patients (comparison group) received standard dermatosis therapy. According to clinical observations, patients with rosacea in the main group experienced a reduction in hyperemia and swelling and resolution of infiltrative manifestations of dermatosis at an earlier time. On an average it occurred 9 - 15 days earlier than in patients from the comparison group. One month after completion of the treatment, among patients with rosacea in the main group, a state of clinical recovery or a significant improvement was registered in 21 (72.4%) individuals, and only improvement - in 8 (27.6%) patients. Among patients in the comparison group, it was found in 12 (42.9%) and in 16 (57.1%) individuals respectively. According to Friedman's non-parametric variance analysis it has a significant difference ($\chi^2 = 5.11$ for the critical value $\chi^2 = 3.84$). Moreover, in the patients of the main group, a tendency towards normalization of the content of transaminases, alkaline phosphatase, cholesterol, lipid spectrum in the blood serum was registered.

Conclusions. The inclusion of an angioprotective drug containing bioflavonoids (diosmin, hesperidin) and a hepatoprotective drug containing silymarin in the comprehensive therapy of patients with rosacea contributes to the normalization of biochemical indicators of the functional state of the organs of the hepatobiliary system and reliably increases the effectiveness of the treatment of clinical manifestations of rosacea.

Pudiak Kh.I. THE STATE OF THE VEGETATIVE PROVISION OF CARDIAC PERFORMANCE IN PATIENTS WITH COVID-19

Department of Infectious Diseases and Epidemiology Bukovinian State Medical University

Introduction. Epidemiological studies indicate a significant impact of COVID-19 on the cardiovascular system. One of the available and non-invasive methods of assessing cardiovascular risk is the study of heart rate variability (HRV), because the rhythm and force of heart contractions reacts very sensitively to any stressful effects. During the examination in the dynamics of patients with coronary heart disease, the consequences of COVID-19 can be detected, which are observed in changes in the autonomic regulation of the cardiovascular system.

The aim of the study is to outline current views on the impact of COVID-19 on heart rate variability based on the literature.

Material and methods. Several literary sources were analyzed over the past 4 years regarding the state of autonomic support of cardiac activity in patients with COVID-19.