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Пристальный интерес к аутоплазме прежде всего обусловлен тем, что в тромбоцитах содержатся белковые факторы, которые запускают клеточный регенеративный процесс. В результате плазмолифтинга восстанавливаются обменные процессы, улучшаются микроциркуляция и метаболизм в клетках, повышается местный иммунитет. Одновременно происходят укрепление костной ткани, формирование матрикса коллагена и кости с участием костных морфогенетических белков коллагена.

Сегодня плазмолифтинг успешно используется в стоматологии для восстановления и заживления тканей. Метод совершенно безвреден и безопасен для пациента и может потребовать всего лишь поверхностной или аппликационной анестезии.

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Білоус І.І. Павлович Л.Б. Чорненька Ж.А.

СУЧАСНИЙ СТАН РОЗПОВСЮДЖЕНОСТІ ЗАХВОРЮВАНОСТІЩИТОВИДНОЇ ЗАЛОЗИ У ЧЕРНІВЕЦЬКІЙ ОБЛАСТІ

CURRENT SITUATION WITH THYROID GLAND DISEASE INCIDENCE IN CHERNIVTSI REGION

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АНОТАЦІЯ

Стан здоров'я населення Чернівецької області, як екологічна проблема, на сьогодні ϵ актуальною оскільки відмічається зростання частоти та важкості захворювань ендокринної системи, що зумовлює великий інтерес до вивчення впливу регіональних медико-соціальних та еколого-гігієнічних факторів на особливості поширення захворюваності щитоподібної залози.

ABSTRACT

The health of the population of Chernivtsi region as an environmental issue is relevant today because there is an increase in the incidence and severity of diseases of the endocrine system, causing a great interest in studying the effect of regional health, social and environmental hygiene factors on the features of the prevalence of thyroid disease.

Ключові слова: щитоподібна залоза, поширеність, захворюваність, розповсюдженість, ендокринологічна служба, ендемічна місцевість.

Keywords:thyroid gland, incidence, morbidity, prevalence, endocrinology service, endemic area.

Thyroid disease ranks second among the endocrine pathology with a steady upward trend, which results from technogenic pollution and occurs in 0.2-0.5% of the population. Its very high incidence falls on the puberty period, that is, the age of 10-15 years. At the same time adolescence accounts for 25% of diffuse toxic goiter. Women suffer from this disease several times more frequently than men.

Current WHO data also confirm a growth in endocrinological diseases among the population of most countries in the world and these diseases stand third in both incidence and as a cause of people's death after cardiovascular diseases and cancer.

Official statistics only reflect a part of the problem, highlighting the prevalence of the most severe clinical forms of the disease. But, according to many epidemiological studies, the total number of patients in relation to undocumented and undetected disease is 1: 3, which indicates significant untapped opportunities of the preventive work.

Estimating the total reported endocrinological morbidity, it should be noted that its level in most

north-eastern regions is below the average throughout the country and the figures in the west, and is about 3-5thousand cases against 6,7 thousand in Ukraine per 100 thousand people. It is due to a significantly greater thyreopathology in the western regions as a result of endemic iodine deficit in this area. Endocrine morbidity indices in each region vary as well.

Thyroid pathology ranks first on the prevalence of endocrine pathology: it is on average 44% now, while in endemic iodine deficit western regions it is 70%. The absolute incidence of these diseases in Ukraine over the past 10 years has increased from 489 thousand to 1 million 657 thousand, and the figures of the prevalence are 941.6 and 3379.2 cases per 100 thousand people respectively.

The prevalence of diffuse toxic goiter is slightly below 100 cases per 100 thousand people. But recent years have seen a gradual growth of this pathology.

There is a dramatic increase in autoimmune thyroiditis, especially in the eastern regions of Ukraine. While 10 years ago the incidence of this disease remained at 20 cases per 100 thousand people, in 2014 the incidence in these areas ranged from 300 to 500 cases per 100 thousand with the average figure in

Ukraine 199.7. Statistical raise of autoimmune thyroiditis, is perhaps partly due to some overdiagnosing, that is, the insufficient use of modern immunological and instrumental methods of research in the thyroid gland. But, as a rule, the growth of the disease is often attributed to the influence of adverse environmental factors on the immunity status of the population.

An area is considered goiter endemic when the prevalence of thyroid hyperplasia of the first degree is 5% or more among children or 30% or more among adults. Ukraine is an endemic area with low iodine contents in the environment. There is no region of Ukraine, whose population would not feel iodine deficiency, including the Chernivtsi region. Especially dangerous is iodine deficiency in pregnant women, resulting in increased risk of having children with low birth weight, sensorineural deafness, spastic paralysis, cretinism, stillbirth and miscarriage. Iodine deficiency significantly affects the mental development of older children. Iodine deficiency significantly affects the mental development of older children.

Here are the data on the structure of endocrine thyroid disease in Chernivtsi region in 2014-2016. (Table 1).

Table № 1

	2014		2015		2016	
	abs. num- ber	%	abs. num- ber	%	abs. num- ber	%
Total number of registered patients	80857	100	85750	100	86455	100
Including thyroid disease	36096	44,6	38378	44,75	39441	45,6
-diffuse toxic goiter	1335	1,65	1424	1,66	1467	1,7
- hypothyroidism	1882	2,32	2151	2,5	2329	3,0
-thyroiditis	2424	2,99	2633	3,07	2727	3,1
- nodular goiter	4358	5,38	4812	5,6	5131	5,9
- I-III degree diffuse goiter	25719	31,8	26933	31,4	27352	31,6
-thyroid cancer	378	0,46	425	0,49	435	0,5

Thyroid diseases ranks second in the structure of endocrine diseases (45.6%). 39,441 adult patients were diagnosed with thyroid disease in 2016 (38 378 in 2015 and 36 096 in 2014). The total number of patients with

endocrine disorders of the thyroid gland has been increasing from year to year.

Incidence and prevalence of thyroid disease in Chernivtsi region per 100 thousand people is displayed in Table 2.

Fabla 1

Incidence a	and prevalence	of thyroid	disease
incluence a	illu bi evalence	or myroid	uisease

	Prevalence		Morbidity					
	2014	2015	2016	2014	2015	2016		
Thyroiditis								
In the region	336,3	364,9	377,9	29,4	24,1	27,2		
In Ukraine	398,4	421,2		40,6	43,1			
	Diffuse toxic goiter							
In the region	185,2	197,3	203,3	14,0	14,3	15,9		
In Ukraine	120,1	124,5		11,5	12,9			
	Hypothyroidism							
In the region	261,1	298,1	322,8	32,9	30,6	40,9		
In Ukraine	214,6	229,3		22,8	25,3			
	II-IIIdegree diffuse goiter							
In the region	720,3	743,4	746,5	50,1	46,7	41,0		
In Ukraine	415,2	415,0		34,3	34,3			
I degree diffuse goiter								
In the region	2848,3	2989,1	3044,4	304,8	271,7	202,8		
In Ukraine	1777,3	1732,1		208,4	199,0			
Nodular goiter								
In the region	604,7	666,9	711,1	90,5	77,6	85,1		
In Ukraine	636,0	677,3		68,8	71,6			

The prevalence among the population for this pathology in the Chernivtsi region diffuse goiter ranks first in 2016 - 3790.9 per 100 thousand people, 3732.4 per 100 thousand people in 2015 and 3568.6 per 100 thousand people in 2014. The incidence of diffuse goiter is 243.8 per 100 thousand people in 2016, 318.5 per 100 thousand people in 2015 and 354.9 per 100 thousand people in 2014.

The prevalence of nodular goiter during this period is 711,1per 100 thousand people in 2016, 666.8 per 100 thousand people in 2015 and 604.7 per 100 thousand people in 2014. The incidence of nodular goiter is 85.1 per 100 thousand people in 2016, 77.6 per 100 thousand people in 2015 and 90.5 per 100 thousand people in 2014.

The prevalence of hypothyroidism in 2016 was 322.8 per 100 thousand people, in 2015 - 298.1 per 100 thousand, in 2014 -261.1 per 100 thousand. The incidence of hypothyroidism in 2016 was 40.9 per 100 thousand people, In 2015 - 30.6 per 100 thousand, in 2014 - 32.9 per 100 thousand people.

The prevalence of diffuse toxic goiter in 2016 was 203.3 per 100 thousand people, the incidence constituted 15.9 per 100 thousand. In 2015 they were 197.3 and 14.3 per 100 thousand people respectively. In 2014 the prevalence was 185.2 per 100 thousand people and the incidence – 14.0 per 100 thousand.

The prevalence of thyroid disease in Chernivtsi region in 2014-2016 is displayed in Fig. 1.

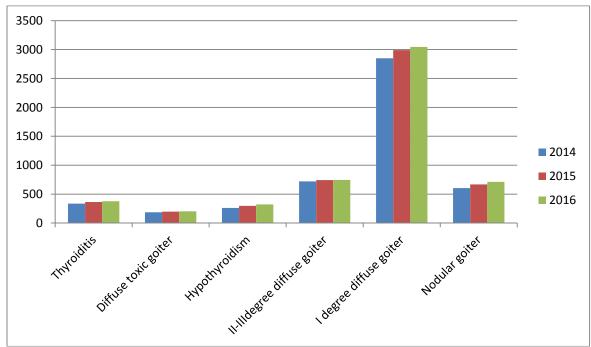


Fig.1. The prevalence of thyroid disease in the Chernivtsi region in 2014-2016

The structure of the endocrine pathology incidence in the adult population of the Chernivtsi region

is dominated by thyroid disease. The structure of thyroid disease incidence is displayed in Fig. 2.

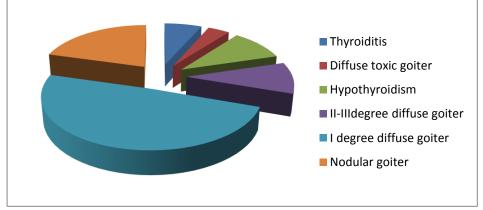


Fig.2. The structure of thyroid disease incidence in 2016 in the Chernivtsi region.

We have analyzed the incidence and prevalence figures in the statistical reports for the period from 2014 to 2016 per 100 thousand people. The figures of the prevalence and incidence of diffuse toxic goiter, hypothyroidism, II-III degree diffuse goiter, Ist degree diffuse goiter in the Chernivtsi region during 2014-2016 is significantly higher than in the corresponding diseases in Ukraine. The incidence and prevalence of thyroiditis and nodular goiter compared with those in Ukraine decreased due to the verification of nodular goiters and iodine prophylaxis.

For the proper functioning of the thyroid gland it is important to supply it adequately with iodine, which is essential for the synthesis of thyroid hormones, but almost in all regions of Ukraine there is iodine deficiency. It should be emphasized that recently there is a further change in the social, economic and environmental conditions in the Chernivtsi region, which can not but affect the health of people living in the area.

To prevent the spread of thyroid disease in Ukraine it is expedient to introduce regular monitoring of iodine supply for the population both within the state and in its individual regions. The main criteria for the effectiveness of iodine prophylaxis is to determine the incidence of diffuse goiter in the population, iodine consumption control that should be conducted by determining the iodine excretion in the urine and its content in iodized salt and iodized food.

The main means of iodine prophylaxis in Ukraine should be considered nutritional iodized salt with obligatory control of the selenium content in it.

The state program to eliminate iodine deficiency related disorders is being fulfilled. It regulates the supply of the population with iodized salt as a major and reliable source of iodine and control in terms of its preservation and quality. To prevent simple diffuse goiter it is important to carry out a set of health measures aimed at improving the welfare and hygiene conditions of human life.

70% of the population are covered with iodine prophylaxis. Preventive maintenance is carried out in three areas: the mass one (iodized salt, milk and bread), the group one (is carried out by means of potassium iodide drugs in special risk groups (children, adolescents,

pregnant women)), the individual one (by a doctor and as anautotherapy).

In general, diseases of the endocrine glands and especially thyroid pathology cause great social and economic damage that results in the cost of medical care and social security (due to the loss of working ability, disability, premature death of patients).

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