МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ ВИЩИЙ ДЕРЖАВНИЙ НАВЧАЛЬНИЙ ЗАКЛАД УКРАЇНИ «БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»



МАТЕРІАЛИ

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KIDNEYS FUNCTIONAL STATUS IN PATIENTS WITH CHRONIC KIDNEY DISEASE AND NONALCOHOLIC STEATOHEPATITIS

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The objectives of the study were to find out the probable effect of the comorbid flow of nonalcoholic steatohepatitis on the functional state of the kidneys in patients with chronic kidney disease (pyelonephritis) of the I-III stage, to determine the pathogenetic role of endothelial dysfunction, lipid distress syndrome, endotoxicosis and oxidative stress in the mechanisms of their mutual burden.

240 patients with chronic kidney disease (chronic bilateral peylonephritis) of the I-III stage were examined, 145 of which had comorbid nonalcoholic steatohepatitis and obesity of the 1st degree (group 1), 95 patients were diagnosed with chronic kidney disease I-III stages without comorbid pathology. Depending on the stage of the chronic kidney disease, both groups were divided as follows: 1st group - into 3 subgroups: 51 patients with 1st stage chronic kidney disease, 53 patients with 2nd stage chronic kidney disease, 41 patients with 3rd stage chronic kidney disease. The 2nd group was divided into 3 subgroups: 32 patients with 1st stage chronic kidney disease, 35 patients with 2nd stage chronic kidney disease, 28 patients with 3rd stage chronic kidney disease. The control group consisted of 30 practically healthy individuals. The diagnosis of NASH was established in accordance with the unified clinical protocol, approved by the order of the Ministry of Health of Ukraine No. 826 from 06.11.2014, in the presence of criteria for the exclusion of chronic diffuse liver disease of the viral, hereditary, autoimmune or medicinal genesis as causes of cholestatic or cytolytic syndromes, as well as the results of the USG survey. The diagnosis of CKD was carried out in accordance with the recommendations of the clinical guidelines of the State Institute "Institute of Nephrology, NAMS of Ukraine" (2012). The study included patients with CKD I-III stage without a nephrotic syndrome with chronic uncomplicated pyelonephritis in the phase of exacerbation. The glomerular filtration rate (GFR) was investigated by creatinine clearance, calculated using the Cockroft-Gaulta formula, as well as by the universal automatic calculator CKD-EPI.

As a result of the research it was established that nonalcoholic steatohepatitis affects the functional state of the kidneys in patients with chronic kidney disease I-III stages with a possible reduction of nitrogen function, velocity of glomerular filtration, increase in the intensity of hypoalbuminemia, proteinuria, leukocyturia, erythrocyturia, cylinduria, bacteriuria than in isolated course chronic kidney disease.

For the comorbidity of the chronic kidney disease with nonalcoholic steatohepatitis and a decrease in glomerular filtration rate, an increase in the intensity of oxidative stress, endotoxicosis, lipid distress syndrome, degree of violation of the functional state of the endothelium: increased activity of iNOS, nitrite/nitrate content, endothelin-1, homocysteine, cytokeratin-18, decrease in the activity of arginase, H2S content, which correlate with the intermediate and high power interactions with the index of glomerular filtration rate.

Garazdiuk O.I.

CHRONIC KIDNEY DISEASE AND SYSTEMIC CONNECTIVE TISSUE DISEASES: ROLE OF MINERAL DISORDERS IN THEIR PROGRESSION, THERAPEUTIC APPROACHES

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Chronic kidney disease (CKD) is defined as a structural or functional kidney abnormality lasting for 3 or more months. The global prevalence of CKD is estimated to be more than 10%, and CKD has emerged as a public health problem. Adverse outcomes of CKD such as kidney failure,