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



МАТЕРІАЛИ

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Thus, CIM index decreased during treatment and surveillance in the general group (n=67) (p<0,05) and the distribution of PAPP -A \geq 4,12 mIU/L (p<0,002), for a specified output increase by CIM distribution PAPP -A \geq 4,12 mIU/L (p<0,001), which were stored and during treatment in the total group (n=67) in the distribution of average CMM for PAPP -A in the treatment of \geq 4,12 mIU/L (p<0,01). The initial increase in CIM , which further decreases significantly in the treatment group (n=23) for the distribution of CRP <17,11 \geq mg/l (p<0,02), also significantly reduce CIM consistent for CRP in the treatment group PSA \geq 12.47 mg/l (p<0,005), as well as in atherosclerosis group for CRP (<16,55 \geq mg/l) with decreasing rate CIM (p<0,05).

Honcharuk L.M. VASOMOTION FUNCTION OF ENDOTHELIUM IN CASE OF GASTRODUODENOPATHY INDUCED BY TREATMENT OF PATIENTS WITH OSTEOARTHROSIS BY NONSTEROIDAL ANTI-INFLAMMATORY DRUGS

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Osteoarthrosis is an acute medical and social problem resulting in temporary incapacity to work, disability and significant lowering of patients' life quality. As of today the main method of osteoarthrosis treatment is use of nonsteroidal anti-inflammatory drugs. According to the references 46,5% of side effects in Ukraine are result of nonsteroidal anti-inflammatory drugs use. Gastric erosions and ulcers induced by nonsteroidal anti-inflammatory drugs use are one of the most frequent causes of admission to in-patient surgery and gastroenterology departments in Europe and the USA. That is why study of some pathogenetic action mechanisms leading to gastroduodenopathy development caused by nonsteroidal anti-inflammatory drugs use in case of patients ill with osteoarthrosis is topical for modern medicine. The object of this study was to determine endothelium vasomotion function in case of gastroduodenopathy induced by treatment of patients ill with of osteoarthrosis by nonsteroidal anti-inflammatory drugs.

50 patients were examined for osteoarthrosis with concomitant gastroduodenopathy induced by nonsteroidal anti-inflammatory drugs use. The patients' distribution has been performed irrespective of Helicobacter pylori presence and/or alimentary tube affection degree. All patients underwent fibrogastroduodenoscopy with targeted biopsy performed by the standard technique using fibrogastroduodenoscopy device «Olympus» in order to diagnose gastroduodenopathy. The presence of Helicobacter pylori has been determined by means of invasive express analysis of urease tissue activity using diagnostic sets Helpil®-test ('AMA', Saint Petersburg), morphologic tests (using azur-II-eosin stain) as well as by means of immunochromatographic Helicobacter pylori antigen faeces test (CerTest Biotec, S.L., Spain, 'Pharmasco').

Vasomotion endothelium function has been studied by means of duplex ultrasonic scanning of brachial artery.

70,0% of patients ill with concomitant gastroduodenopathy induced by nonsteroidal antiinflammatory drugs use were diagnosed with insufficient vasodilation. For instance, 46,0% of patients under examination were diagnosed with insufficient vasodilation, 24,0% of persons under examination were diagnosed with paradoxical vasoconstriction. It is to mention that endothelium shear stress and endothelium shear stress sensitivity during reactive hyperaemia test was decreasing more apparently in case of patients with concomitant Helicobacter pylori infection.

Thus, obtained results indicate development of endothelial dysfunction of patients ill with osteoarthrosis in case of gastroduodenopathy induced by nonsteroidal anti-inflammatory drugs use. Concomitant Helicobacter pylori resulted in significant dysfunction of endothelium of patients ill with osteoarthrosis with gastroduodenopathy induced by nonsteroidal anti-inflammatory drugs use.