



Moroz P.V.

LAPAROSCOPY AS A DYNAMICALLY DEVELOPING DIRECTION FOR THE TREATMENT OF PERITONITIS

Department of Surgery № 1

Bukovinian State Medical University

One of the causes of high mortality (17-65%) in widespread peritonitis is untimely treatment of the patient, late diagnosis and factors that affect the progression of the inflammatory process in the peritoneal cavity.

The difficulty of diagnosis is complicated by both objective reasons: the use of analgesic and antibacterial drugs, multi-purpose therapy, and subjective: the presence of negativity in the patient's attitude to surgery. Surgical intervention in peritonitis is aimed at solving at least four tasks: elimination of the cause of peritonitis; effective sanitation of the peritoneal cavity; creation of conditions for control over the course of the inflammatory process; evacuation of exudate.

With the development of modern surgery, there is a need to identify the highest priority method of treatment of various forms of acute peritonitis. The most promising area in the diagnosis and treatment of peritonitis is the introduction of laparoscopic technologies.

Analyzing the research of various surgical schools, we found that with common forms of peritonitis to conduct a one-time rehabilitation to obtain abacteriology, it is almost impossible. Therefore, there is a need for repeated operations to ensure active rehabilitation and drainage of the peritoneal cavity. For this purpose, programmed laparoperpsy does not lose relevance, but there are already many developed laparoscopic techniques to avoid the use of laparotomy approaches.

One of such methods is the use of special devices that allow inserting laparoscopic instruments into the peritoneal cavity through the abandoned ports, which for the period between remediation, served as places of drainage. This allowed for remediation without the risk of damage to structures when starting tools.

Thus, laparoscopic technologies under certain conditions allow to reliably eliminating the cause of peritonitis, to effectively rehabilitate the peritoneal cavity and its drainage, but when in doubt about their adequacy, it is necessary to use laparotomy techniques, including programmed laparoperation.

The use of programmed laparoscopy in the treatment of peritonitis reduces the patient's hospital stay and bed-days, avoids a large number of postoperative complications and improves the quality of life of patients.

Penishkevich Ya.I.

PATHOPHYSIOLOGICAL MECHANISMS OF DIABETIC RETINOPATHY

B.L. Radzikhovskiy Department of Ophthalmology

Bukovinian State Medical University

The evaluation of pathophysiological mechanisms in diabetic retinopathy found that early stages are characterized by histopathological changes which include loss of pericytes, basement membrane thickening, haemodynamic alterations leading to reduced vascular integrity. The later stages of diabetic retinopathy are characterized by complications, which include visual impairment, primarily due to macular edema and proliferative diabetic retinopathy. Also the severity of retinopathy was associated with poorer metabolic control, demonstrated by elevated HbA1c. Diabetic complications accompany the accumulation of advanced glycation end products in diabetic tissues. Increased accumulation of these products has been reported in epiretinal membranes by the use of immunohistochemical technique. Binding of advanced glycation end products to high-affinity receptor in pericytes exerts selective toxicity resulting in their death. Vascular endothelial growth factor exert important role of intraocular neovascularization due to ischemic retinopathy.

So, as conclusion, we can suggest that early stages of diabetic retinopathy are characterized by histopathological changes which include loss of pericytes, basement membrane thickening, haemodynamic alterations leading to reduced vascular integrity. The later stages of diabetic retinopathy are characterized by complications, which include visual impairment, primarily due to