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CHANGES IN VASCULAR ENDOTHELIUM ON THE BACKGROUND OF CORONARY HEART DISEASE AND ATHEROSCLEROSIS

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Today, the main reason for the development of coronary heart disease (CHD) - atherosclerosis - is regarded as one of the forms of chronic inflammation, which is based on the violation of cholesterol metabolism. CHD occurs in men in the absence of explicit risk factors, usually in the age of 55 years of age due to not always known causes of its occurrence is possible and at an earlier age. Recent studies have undeniably proved that inflammation is one of the main pathogenetic mechanisms of atherosclerosis, starting with the first manifestations of damage to the vessel wall and ending with the rupture of the atherosclerotic plaque and the onset of acute coronary syndrome. Therefore, the study of atherogenesis by studying the intima-media complex will make it possible to detect patients at the subclinical stage of atherosclerosis, and the application of various therapies (metabolic, hypolipidemic) objectivizes the therapeutic approach that is more effective in the treatment and prevention of early atherosclerosis, which will enable to prevent the development of severe vascular diseases of the cardiovascular system and central nervous system.

The main purpose of their work is to determine the early signs of endothelial dysfunction and increase the thickness of the intima-media complex (TCIM) of the carotid arteries and to objectify the level of inflammation markers in subjects with subclinical atherosclerosis, the effect of treatment.

The following research methods were used: a detailed collection of complaints and anamnesis, a thorough objective examination, laboratory, biochemical, instrumental research methods. Experts of the European Society for hypertension and the European Society of Cardiologists in 2003 determined the optimal values of TCIM <0.9 mm; an increase is considered to be TCIM of 0.9 mm to 1.3 mm, and criterion of atherosclerotic plaque - TCIM ≥ 1.3 mm.

A total of 45 young men of the male sex with the phenomena of subclinical atherosclerosis were examined, at the beginning of treatment and after treatment after 3 months. The colored duplex scan (CDS) was examined by the internal right and left carotid artery (ICA) TCIM. Before the treatment with hypolipidemic drugs TCIM was - <0.9 mm, which was diagnosed for right asthma in 26.7% of cases among the examined patients, 0.9-1.3 mm - in 33.3% of the subjects,> 1.3 mm in 40 % of patients. For the assessment of the left ICA, the data were as follows: TCIM - <0.9 mm at 26.7%, 0.9-1.3 mm -4.6.7%,> 1.3 mm in 26.7% of the subjects. After the treatment, which lasted for 3 months, the following parameters were obtained: TKIM - <0,9 mm on right VAA in 43,5%, 0,9-1,3 mm in 30,4%,> 1,3 mm in 26,1 . The left CCA study was 56.5%, 26.1% and 17.3% respectively, indicating a positive effect of treatment and indicating an increase in the number of patients with normal CI (<0.9 mm) and a significant decrease in CIM thickening.

The use of anti-atherosclerotic therapy at the stage of subclinical atherosclerosis, which is diagnosed with color duplex scan with the evaluation of TCIM, makes it possible to reduce the level of coronary and cerebral pathology, and the use of hypolipidemic therapy significantly reduces the signs of atherosclerosis.

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SPINAL GOUT: CLINICAL ASPECTS

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Gout is the most common inflammatory arthritis that is caused by the deposition of monosodium urate crystals in synovial fluid, periarticular tissue, subcutaneous tissue, and the urinary tract. Recent reports of the prevalence and incidence of gout vary widely according to the population studied and the methods employed, but they range from a prevalence of less than 1% to 6.8% and an incidence of 0.58–2.89 per 1,000 person-years (Mats Dehlin,et al. 2020).