Air pollution may affect some plausible biological mechanisms that could explain some of the exacerbation of CVD morbidity and mortality. Air pollution exposure may increase systemic cytokine-mediated inflammation and prothrombotic activity. In susceptible people, ultrafine particles were able to provoke alveolar inflammation, with the release of mediators capable of increasing blood coagulability. Increased plasma viscosity is a potential mechanism explaining why high fibrinogen levels are related to increased CVD risk. Similarly, elevated C-reactive protein, ICAM-1, and VCAM-1 levels have been associated with inflammation and cardiovascular risk. An increase in C-reactive protein may reflect arterial damage from white blood cell invasion and inflammation within the wall due to air pollution exposure, thus inducing cardiovascular events.

PM exposure effect on markers of coagulation, inflammation and endothelial function. This association should be modified by race, sex, and age. The question about the most susceptible people is still not answered.

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DYNAMICS OF INDICATORS ANTIOXIDANT PROTECTION IN PATIENTS WITH CHRONIC HEPATITIS DURING THE COMPREHENSIVE TREATMENT WITH INCLUSION “HEPTRAL” BELONGS TO DISEASE WITH CHRONIC HEPATITIS

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The aim of our study was to study the effect of “Heptral” on the results of treatment of patients with chronic hepatitis non-viral origin. 41 patients with chronic hepatitis aged from 22 to 75 (51,3 ± 14,5) have been explored. According to the treatment, patients are divided into two groups. The basic group consisted of 21 patients, whom together with standard treatment prescribed pills “Heptral” 1 tablet three times a day 30 minute before meal for 15-18 days.The group for compare were 20 patients with chronic hepatitis non-viral origin,who received the standard treatment. The group for check up were 20 practically healthy volunteers. We researched the concentration in the blood of the reaction products thiobarbituric acid content of glutathione in the blood, activity of catalase, glutathione peroxidase.

As a result of research discovered a significant increase in the concentration of reduced glutathione during treatment in patients who additionally received “Heptral”.They had contents of reduced glutathione after treatment higher by 26,1% ($p<0,05$) in compare with contents before treatment. The trend to reduced activity of glutathione peroxidase observed during treatment in both groups of patients, but it was not credible. Blood catalase activity significantly increased after treatment in patients who took “Heptral” on average by 20,4% ($p <0,05$) in compare with that before treatment, in patients of the group of compare – by 13,8% ($p <0,05$). After treatment we could see decrease of concentration of reaction products of thiobarbituric acid in patients of both group, more reduction of their content noted in patients , whom to complex treatment was included “Heptral”.

During two weeks of treatment better antioxidant status was adjusted in patients with chronic hepatitis, whom in addition to standard treatment took “Heptral”. For full correction of the clinical manifestations of the disease and antioxidant status should follow the chosen schemes of treatment as the maintenance dose to begin of stable remission in outpatient stage.

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COLCHICINE EFFICACY AND SAFETY FOR THE TREATMENT WITH ISCHEMIC HEART DISEASE: A SYSTEMATIC REVIEW AND META-ANALYSIS OF RANDOMIZED TRIALS

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Colchicine, an anti-inflammatory drug that has been used in rheumatology for a long time to treat gout and prevent seizures; it was firstly presented in cardiology to reduce the recurrence rate of