

on an archaeological expedition. A papyrus was found in 1901 during excavations near the settlement of Del Bullas on territory of Overhead Egypt, where the administrative center of ruling XVII dynasty of pharaohs was situated. It was published in 1905. Papyrus contains 18 foils with medical recipes.

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**PREVALENCE OF MAJOR NONCOMMUNICABLE DISEASES AMONG
THE ECONOMICALLY ACTIVE POPULATION OF CHERNIVTSI REGION AND ITS
AFFECTIVE FACTORS**

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Major noncommunicable diseases (NCDs) have been described as an unacceptable blind spot on the collective path to sustainable development, as they cause far more deaths and disabilities than any other group. The issue of NCDs has been included in the Global Sustainable Development Goals since 2015, in particular, Goal 3 provides for ensuring a healthy lifestyle and promoting well-being for everyone of all ages, and Goal 3.4 – reducing premature mortality from NCDs by a third.

In order to study the prevalence of NCDs among the economically active population (EAP) and the factors that were associated with it, we set the task to analyze the differences in indices by gender and place of employment. The materials were the results of a step-by-step cross-sectional sociological study of self-assessment of EAP concerning their health (N=1252), half of which were employed in the market (n=633). Sociological and statistical methods (PIVOT, -Square for comparing relative values) were used.

It was found that the prevalence of the main NCDs according to respondents' self-assessment was 35.5% and was lower among those employed in the market (33%) than among the other categories (41%), ($p < 0.05$). The lowest index was in the "market" group among men, 27% who were less likely to visit a doctor during the year than men in the "other categories" group – 32% vs. 51% ($p < 0.001$) correspondently; economically active people were less likely to visit a doctor "more than a year ago" in comparison with the respondents of the other category – 24% vs. 32%, ($p < 0.05$); more often did not go at all – 44% vs. 17%, ($p < 0.001$). The combination of major NCDs with each other was more characteristic among women than among men – 28% vs. 18% by the structure of diseases, or 11% vs. 5% by prevalence ($p < 0.01$). The presence of the main NCDs significantly affected the reason for going to the doctor. Respondents who had cardiovascular diseases, diabetes mellitus, and chronic respiratory diseases were more likely to be treated by a primary care physician (38%) than those who did not report the presence of the disease (29%) ($p < 0.05$). Among individuals without NCDs, there were 2 times more who did not visit a doctor at all (31%) than among the individuals with the above-mentioned NCDs (16%) ($p < 0.001$). Respondents who had NCDs were more likely to visit a doctor with acute or exacerbation of chronic illness (45%) than those without NCDs (25%) ($p < 0.001$) and were more likely to be admitted to monitor the disease – 21% vs. 12% ($p < 0.01$). At the same time, respondents without NCDs were more likely to apply for preventive examination (38%) than the ones with NCDs (30%), ($p < 0.05$) and for obtaining a certificate – 12% against 2%, respectively ($p < 0.001$). These patterns were the same regardless of gender and level of education. We see the quality of their implementation as a significant factor in the timely detection of diseases during preventive examinations.

The study showed that stress and overwork were common background conditions among a third of EAP (34%). It was found that the employment of business entities in the field of trade (market) associated with unpredictable risks did not increase their frequency (30%). In contrast, the "other categories" group, which included civil servants, were significantly more likely to be stressed (42%) ($p < 0.001$), as well as women in general (43%) compared to men (25%) ($p < 0.001$). Depression was noted by 12% of respondents: women – 15%, men – 8%, the least of all civil servants – 3%, which characterizes their work as stable with high responsibility. Social insecurity,

instability, and high responsibility in the workplace should be considered additional factors of impact on health, which should be taken into account in the multi-factor prevention of NCDs.

Thus, regardless of the place of employment, women were more likely than men to report NCDs and comorbidities, which was associated with stress and with more frequent visits to doctors. Improving the quality of preventive examinations is an important reserve for the early diagnosis of NCDs in EAP. Employment features should be taken into account in the prevention and timely diagnosis of NCDs.

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**THE RISK OF CARDIOVASCULAR DISEASES IN PATIENTS
WITH ARTERIAL HYPERTENSION**

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Researchers ascribe the reduction in circulatory mortality among the population of the most economically developed countries to the reduction in the number and level of major risk factors: smoking, total cholesterol and blood pressure, as well as to the widespread introduction of modern diagnostic and treatment methods.

The purpose of our study was to determine the level of risk factors for cardiovascular disease in patients with hypertension (AH). During the study, the following task was solved: cardiovascular risk factors in patients with initial forms of arterial hypertension were analyzed. The study was conducted on the basis of the Regional Cardiology Dispensary of Chernivtsi. The study subjects included 85 patients: 45 were men (52.9%) and 40 were women (47%). The average age of patients was 50 +8.6 years. 70 people among them are of working age (82.4%). Cardiovascular risk assessment was performed among people who were diagnosed with the initial forms of hypertension according to the criteria of national recommendations for the diagnosis and treatment of hypertension (AH). All patients were at the stage of outpatient dispensary observation by a family doctor or cardiologist.

According to the results of the study, the following data were obtained: hypercholesterolemia (53.3%) is the most common risk factor (CRF) among patients with newly diagnosed hypertension. Obesity occurs in half of patients, the average body mass index (BMI) was $32.1 + 7 \text{ kg} / \text{m}^2$. 34.1% patients had a burdensome heredity. Risk factors such as smoking were found among 32.2% (25% among men and 7.2% among women). 14.6% had elevated blood glucose levels. It should be noted that almost all risk factors were more common among men, but there are no gender differences in the prevalence of unmodified risk factor (URF) - aggravating heredity.

A combination of 2 or more risk factors (RF) was found in most patients. Moreover, the absence of additional cardiovascular risk factors among patients with newly diagnosed hypertension occurred only among women (25%). The presence of two risk factors among men and women is approximately the same (41.9% and 43.8%, respectively). The combination of three and four risk factors was almost 2 times more common among men than women (40.2% and 20.1%). The respondents among patients with arterial hypertension (AH) who did not receive treatment before had a medium or high risk (41.7% and 50.1%, respectively) factors.

According to the results of the study, the following conclusions were made: the high prevalence of risk factors in the study population indicates an unfavorable epidemiological situation regarding the occurrence of cardiovascular disease in patients with hypertension. Coping with risk factors should be aimed at treating high blood pressure, detecting dyslipidemia, obesity, combating smoking and increasing the motivation of the population to follow the principles of a healthy lifestyle - nutrition, optimal exercise and avoidance of bad habits.