



According to the presence of obesity and chronic kidney disease all patients were divided into three groups. The first group comprised of patients with 2 stage CKD without concomitant obesity (17 persons), The second group included stage 1 obese patients with stage 2 CKD (24 persons), group 3 consisted of 19 patients with stage 2 CKD and stage 2 concomitant obesity. Body mass index (BMI) was calculated by the formula:  $BMI = \text{body weight in kg} / (\text{height in meters})^2$ . The control group consisted of 20 practically healthy individuals. Statistical analysis of the material was performed by the methods of variation statistics with the definition of averages ( $M$ ), the average error ( $m$ ). By taking a probable difference parameters at  $p < 0.05$ .

Analysis of the results of the study showed that the renal function in the evaluation of patients with the second degree CKD and without concomitant obesity as compared with the healthy subjects showed the presence of proteinuria and deterioration of glomerular filtration rate ( $p < 0.05$ ). However, in the groups of patients with obesity these figures as compared with the patients without concomitant obesity were reliably lower ( $p < 0.05$ ) and were dependent on the degree of obesity.

So, the analysis of clinical and laboratory parameters revealed the presence of an imbalance in fat metabolism in obese and non-obese patients with chronic kidney disease. However, the changes in patients with II degree obesity were more significant. In this same group the patients showed a more pronounced impairment of renal function, indicating a more severe course of disease in obese patients. It means that this variant of the disease is more unfavorable.

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#### **FAMILY ENTEROBACTERIACEAE SPP. ANTIBIOTIC RESISTANCE AS THE MAIN PATHOGEN OF THE URINARY TRACT INFECTIONS AMONG ADULTS**

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A growing antibiotic resistance among the pathogens of infectious and inflammatory diseases is an extremely serious problem in medicine and nephrology, in particular. Awareness on regional bacterial resistance of pathogens of urinary tract infections is the «basis» of a differentiated approach to empirical antibacterial treatment, as a pathogenetic treatment of this pathology.

The aim of the article is to set the range and dynamics of the family *Enterobacteriaceae* antibiotic resistance as dominant among different groups of pathogens of the urinary tract infections in the adult women of the Chernivtsi region. A retrospective analysis of the bacteriological examination of 396 urine samples of the adult women of the Chernivtsi region (2009–2013) was conducted with the purpose of verification of the diagnosis «Urinary Tract Infections» (UTI).

99 strains of the family *Enterobacteriaceae* (except *Proteus*) were extracted in etiologically significant quantities. Dynamics (2009–2013) of the *Enterobacteriaceae* family strains resistance (except *Proteus*) as the main pathogen of the urinary tract infections in women (89 strains of the family *Enterobacteriaceae* (except *Proteus*)) living in Chernivtsi region was largely dependent on the group of antibacterials and mostly characterized by «undulatory» varied nature.

Results of the study show that uropathogen *E.coli* extracted from the women living in this region retains sensitivity to penicillin series antibiotics ( $\chi^2 = 3.89$ ;  $p < 0.05$ ), fluoroquinolones ( $\chi^2 = 9.15$ ;  $p < 0.01$ ) and chloramphenicol ( $\chi^2 = 5.37$ ;  $p < 0.05$ ). A clear tendency to reduce antibiotic resistance strains of *E.coli* to cephalosporins of the 1st generation and presence of «undulating curve» resistance to cephalosporins of the 3rd generation is traced as well.

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#### **THE WAYS OF THERAPEUTIC OPTIMIZATION IN PATIENTS WITH GOUT**

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The topicality of medical treatment of gout is high due to increasing incidents in recent decades. Administration of the hypouricemic drug Allopurinol is often accompanied by severe side effects. Therefore, it is necessary to search for new drugs that have a positive impact on gout including extra-articular symptoms.

The aim of the study was to enhance the efficacy of treatment in patients with gout in exacerbation stage and concomitant disorders of the hepatobiliary system by means of herbal medicine – Urocholum.

50 patients with goat in exacerbation stage of arthritis and concomitant disorders of the hepatobiliary system were examined. The age of the investigated persons was  $53,4 \pm 1,10$ . The patients of the control group took a basic complex (diet №6, ibuprofen, local anti-inflammatory therapy). 30 persons were included into the research group. They took a basic complex with the additional medicine Urocholum in the dosage 20 drops three times a day 30 minutes before meals for 15-18 days.

Administration of the remedy investigated promoted a rapid regression of clinical symptoms of hepatobiliary disorders (painful feeling during palpation in the right upper quadrant of the abdomen, bloating, bitterness and dryness in the mouth), normalization of the bilirubin concentration, uric acid, urea, liver enzymes activity as compared to patients of the control group. Urocholum affected diuretic indices. The concentration of uric acid in the urine increased