



postgraduate education significant improvement was revealed. Doctors considered, that participation in SBS simulation scenario was relevant to their work and effective in teaching basic knowledge and skills, promoted reflection and team discussion.

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**GLYCEMIA REGULATION AND GLYCEMIC TYPE IN CHILDREN SUFFERING
FROM BRONCHIAL ASTHMA**

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Bronchial asthma (BA) remains one of the most common chronic and complicated issues concerning the treatment of inflammatory diseases. According to the current standards of treatment and prevention the basic therapy of BA in children includes inhalation glucocorticosteroids (iGCS). At the same time, the question concerning the its safe administration remains topical, because systemic glucocorticosteroids (sGCS) stimulate the processes of gluconeogenesis. Since high doses of drugs and their long administration in susceptible individuals may be associated with various side effects similar to those with sGCS therapy, nowadays there is much concern about potential systemic effects of iGCS.

Objective of the research is to study peculiarities of glycemia regulation and glyceemic type in children suffering from bronchial asthma.

63 bronchial asthma patients were comprehensively examined under conditions of the Pulmonological-Allergological Department at the Regional Children Clinical Hospital (RCCH) in Chernivtsi. An average age was $11,43 \pm 0,39$ years (from 4 to 17), on an average the disease lasted for $6,91 \pm 0,45$ years (from 1 to 14). At the same time, severe BA was found in one third of patients, and this cohort of patients received high doses of iGCS. Therefore, two groups for comparison were examined where glucose utilization indices in children were compared. I group included patients who received low and mean doses of iGCS, II group included children who received high doses of iGCS. By means of immune-enzyme analysis performed by the immunological laboratory at the RCCH in Chernivtsi the following parameters were determined: the state of glucose metabolism regulation according to the content of antibodies IgGclass to insulin.

The differences in the groups of comparison according to the indices of carbohydrate metabolism regulation were found to be statistically significant. Thus, average values of antibody content to insulin were found to be in the concentrations $25,36 \pm 2,83$ Un/ml (min – 0, max – 125,3 Un/ml). It should be noted, that high titers of antibodies from IgGclass to insulin in the blood serum were associated with an increased risk of disturbed glycemia regulation. Odds ratio showed that with the use of high doses of iGCS in comparison with low and mean doses the chances of increased glycemia were- 2,2 (95%CI 0,67-6,92) and concerning glucose utilization (OR) = 1,64 (95%CI 0,54-5,0).

Therefore, high doses of iGCS increase in considerably hyperglycemia risk on an empty stomach (OR=2,2), 2 hours after meals (OR=1,64), and it is accompanied by an increased risk of elevated content of antibodies to insulin (OR=1,6), which is manifested by disturbed utilization of glucose in children suffering from BA.

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**A CASE OF EXTRAPULMONARY TUBERCULOSIS IN A CHILD WITH CONGENITAL
BRAIN MALFORMATION**

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Tuberculosis is a major public health problem all over the world. Tubercular meningitis is the most dangerous form of tuberculosis in childhood, that is an important cause of permanent neurological disability in children and death. Extrapulmonary tuberculosis usually presents more of a diagnostic problem than pulmonary tuberculosis. In part this relates to its being less common and,