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ANALYSIS OF INDICATORS OF FIBRINOLYTIC AND PROTEOLYTIC ACTIVITY OF BLOOD PLASMA IN PATIENTS WITH CHRONIC PANCREATITIS COMBINED WITH HYPOTHYROIDISM

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Polymorbidity is recognized as a global problem in modern medical science, and its study is one of the most important ways to improve the individual approach to the treatment of patients with combined pathology and can improve large-scale socio-economic consequences at the population level.

The aim of the study is to analyze the state of proteolytic and fibrinolytic activities of blood plasma in patients with chronic pancreatitis combined with hypothyroidism. 105 people participated in our study, the 1st group of which consisted of patients with chronic pancreatitis (n=27), group 2 – patients with hypothyroidism (n=30), group 3 – patients with chronic pancreatitis combined with hypothyroidism (n=28), group 4 – almost healthy individuals (n=20). The state of fibrinolytic activity of blood plasma was studied by lysis of azofibrin, followed by determination of total fibrinolytic activity, non-enzymatic fibrinolytic activity and enzymatic fibrinolytic activity. Assessment of the state of the proteolysis system was studied by lysis of azoalbumin (breakdown of low molecular weight proteins), azocasein (breakdown of high molecular weight proteins) and azocol (breakdown of collagen).

When analyzing the results of the study, we can observe a probable increase in lysis of azoalbumin by 1.89, 1.96 and 2.16 times (p<0.05) in groups 1, 2, 3 compared with the group of almost healthy individuals. In patients with chronic pancreatitis and hypothyroidism, the most pronounced degradation of low molecular weight proteins was observed, which was 13.86% and 9.75% (p<0.05) higher than in the first and second groups. Indicators of azocasein lysis by 52.48%, 56.35% and 95.03% (p<0.05) were found in groups 1, 2, 3 compared with almost healthy individuals. Azocasein lysis was higher by 27.89% and 24.73% (p<0.05) in patients with chronic pancreatitis combined with hypothyroidism than in patients in groups 1 and 2. Azocol lysis was significantly higher by 10.85%, 12.05%, 16.87% (p<0.05) in groups 1, 2, 3 compared with almost healthy individuals. In addition, in patients with comorbid pathology there was an increase in lysis of azocol by 5.3% and 4.3% (p<0.05) compared with the first and second groups. The total fibrinolytic activity of blood plasma was 8.3%, 6.7%, 16.26% (p<0.05) lower in patients of groups 1, 2, 3 compared with almost healthy individuals. Non-enzymatic fibrinolytic activity of blood plasma was 44.89%, 49.64%, 66.27% higher in groups 1, 2 and 3 than in almost healthy individuals. Enzymatic fibrinolytic activity of blood plasma was 44.28%, 42.25%, 90.57% (p<0.05) lower in group 1, 2, 3 compared with the group of almost healthy individuals (p < 0,05). There was a decrease in the level of enzymatic fibrinolytic activity of blood plasma by 32.07% and 33.96% (p<0.05) in patients with chronic pancreatitis associated with hypothyroidism compared with participants in groups 1 and 2 without comorbid pathology.

Thus, the most pronounced changes in proteolytic (increased lysis of azoalbumin, azocasein, azocol) and fibrinolytic (decrease in total, non-enzymatic and enzymatic) activities of blood plasma in patients with chronic pancreatitis associated with hypothyroidism were determined.

Reva T.V. SOME ASPECTS OF THE MOTOR CHANGES IN PATIENTS WITH GASTROESOPHAGEAL REFLUX DISEASE DEPENDING ON THE TYPE OF REFLUX

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The symptoms of gastroesophageal reflux disease (GERD) are found in almost 1/3 of the adult population, and endoscopic signs of reflux esophagitis - in 45-80% of patients with GERD. GERD is not a progressive disease, but the activity of the disease is approximately the same