

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



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NEUROPHYSIOLOGICAL STATUS OF PATIENTS WITH ATRIAL FIBRILLATION

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Introduction. The development of dementia in patients with atrial fibrillation (AF) is associated with decreased independence in daily life, as well as increased mortality. These facts emphasize the importance of assessing cognitive functions in patients with AF and monitoring their condition. It is assumed that the most vulnerable in AF are verbal memory, attention and executive functions.

Material and methods. The study included 50 patients with AF. The study included patients with symptomatic non-valvular AF refractory to antiarrhythmic therapy (paroxysmal or persistent form), with a risk of thromboembolic complications on the CHA₂DS₂-VASc scale of at least 2 points and a risk of bleeding on the HAS-BLED scale of at least 3 points.

Results. According to the results of screening neuropsychological testing, 5 (10.0%) patients with AF had a Mini-Mental State Examination (MMSE) level of less than 24 points. In addition, 40% (20 patients) had a syndrome of moderate cognitive impairments - MMSE scores of 27-24 points, of which only one patient had a history of repeated ischemic stroke (residual effects - mild left-sided hemiparesis 4 points). Most patients showed signs of dyscirculatory changes in the brain substance in the form of an increase in the width of the third ventricle (80.0%), as well as the presence of leukoaraiosis zones (90.0%). Leukoaraiosis was detected predominantly of periventricular localization; however, in 20 (40.0%) patients it was located periventricular and subcortical. Cysts were found in 15 (30.0%) patients, of them post-stroke in three cases, and lacunar cysts - in one patient.

Conclusions. About half of the examined patients with nonvalvular AF have cognitive deficits in the form of a syndrome of moderate cognitive impairments, as well as signs of dyscirculatory changes in the brain substance according to MRI data.

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OPTIMIZATION OF THE DIAGNOSIS OF RESPIRATORY EXTRAESOPHAGEAL SYMPTOMS OF GASTROESOPHAGEAL REFLUX DISEASE

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Introduction. The problem of the diagnosis and treatment of gastroesophageal reflux disease has recently attracted the attention of doctors from different countries of the world due to the increasing prevalence of gastroesophageal reflux disease, especially in elderly patients, a wide range of extraesophageal complaints, and the development of serious complications.

The aim of the study. To investigate the prevalence of respiratory extraesophageal symptoms of gastroesophageal reflux disease in elderly patients using a modified questionnaire (MQ) of GERD-Q.

Material and methods. We examined 60 patients with typical gastroesophageal reflux disease complaints (38 women, 22 men), with an average age of 65.5 ± 7.4 years. We conducted the study by questioning the patients with typical gastroesophageal reflux disease complaints, data of the EPGDS and spirometry. Typical and respiratory extraesophageal symptoms of gastroesophageal reflux diseases were verified using the MQ GERD-Q (10 questions 0-3 points for each). Additionally, patients were questioned about their eating behavior, smoking, drinking coffee and alcohol. The efficacy of the antisecretory therapy to symptoms of gastroesophageal reflux disease with omeprazole 40 mg/d on 7 days and 1 month after initiation of treatment was evaluated using the MQ GERD-Q.

Results. In 75% of patients, the respiratory extraesophageal symptoms of gastroesophageal reflux disease were detected (25% had "lower" type, 50% had "upper" type). With the help of EGDS, gastroesophageal reflux disease without esophagitis was found in 73.3% of patients with

respiratory extraesophageal symptoms of gastroesophageal reflux disease D, and esophagitis of the I-II stage was diagnosed in 26.7% of patients.

Signs of broncho-obstructive syndrome, according to spirometry data, were found in 18.2% of patients with gastroesophageal reflux disease without esophagitis and in 44.5% of patients with gastroesophageal reflux disease with esophagitis. The intensity of broncho-obstructive syndrome manifestations directly correlated with the duration of gastroesophageal reflux disease and the presence of harmful habits. According to the results obtained by the MQ GERD-Q, the score in patients with respiratory extraesophageal symptoms of gastroesophageal reflux disease without esophagitis averaged 15.25 ± 2.15 , and in patients with respiratory extraesophageal symptoms of gastroesophageal reflux disease with esophagitis it was 21.82 ± 4.14 . The evaluation of the treatment results with MQ GERD-Q showed positive dynamics in reducing the number of points in the questionnaire after 1 week to 12.61 ± 2.12 in patients with respiratory extraesophageal symptoms of gastroesophageal reflux disease without esophagitis and up to 18.32 ± 3.11 in patients with respiratory extraesophageal symptoms of gastroesophageal reflux disease with esophagitis. After 4 weeks, the sum of points on the MQ GERD-Q was 6.58 ± 1.76 and 8.64 ± 2.34 , respectively.

Conclusions. Thus, in elderly patients, the frequency of respiratory extraesophageal symptoms of gastroesophageal reflux disease increased in comparison with the general population. The severity of the symptoms of respiratory extraesophageal symptoms of gastroesophageal reflux disease ("lower" type, broncho-obstructive syndrome) correlated with the progression of gastroesophageal reflux disease, the development of esophagitis and the wrong lifestyle. Treatment with omeprazole at a dose of 40 mg/d for 4 weeks was effective in all patients according to the MQ GERD. Having received the incomplete disappearance of respiratory extraesophageal symptoms of gastroesophageal reflux disease, we recommended the patient to continue the prescribed therapy for up to 8 weeks and to modify the lifestyle.

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ISSUES IN STUDENT ATTITUDE TOWARDS PHYSICAL EDUCATION AND SPORTS ACTIVITY IN THE MODERN UNIVERSITY MEDIUM

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Introduction. It is necessary to point out that the effectiveness of physical education classes directly depends on the extent of students' awareness of the goals of physical education and the personal value of such courses. Therefore, it is necessary to search for such methods of organizing physical education classes and strategies of influence, which could most effectively ensure forming a positive personality orientation in physical education classes.

Purpose of the study. Recently, many specialists in the field of physical education have raised the issue of the need to increase interest and improve the student's attitude toward physical education and sports. The analysis of the formation of the orientation of students' personalities showed that the majority have practically no physical education and sport orientation.

Material and methods. The study of the formation of the orientation of the student's personality in physical education classes allows us to state that the orientation is at a low level as a whole. It is necessary to note that 29% of girls and 4.5% of boys have never participated in sports. Most students, except for mandatory classes, are not involved in physical culture. However, according to the survey data, 28.5% of boys and 39% of girls indicate that the university has all the conditions for physical culture, and they may practice sports at a suitable time. It was found that the vast majority of 1st-year students (75.8%) attend training sessions due to necessity, and only 9.4% attend physical education classes with desire.

Results. Despite the general trends of students' orientation, an essential point of their positive motivation is the state of the sport training facilities of educational institutions, the orientation of the educational process and content of classes, the level of requirements of the curriculum, special courses, etc. Thus, the necessity to find ways which increase students' interest in