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INDICATORS OF DAILY BLOOD PRESSURE MONITORING IN PATIENTS WITH NON-ALCOHOLIC STEATOHEPATITIS WITH COMORBID OBESITY

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Objective: to evaluate the features of arterial hypertension by 24 hour monitoring of blood pressure in hypertensive patients depending on the presence and degree of comorbid first degree obesity and nonalcoholic steatohepatitis.

Materials and methods. The study involved 50 people aged from 35 to 55 years. 25 patients with normal body weight (BMI to 24.9 kg / m²) were diagnosed with NASH, stage II hypertension while in 25 patients NASH was combined with first degree obesity and stage II essential hypertension. The control group consisted of 20 virtually healthy subjects. The obesity diagnosis was made when BMI reached over 30 kg / m²: $BMI = \text{weight (kg)} / \text{height}^2 \text{ (m)}$.

Results. The patients of all groups had the average daily SAP which was reliably higher than the normal one ($p < 0.05$), not only in the group with concomitant EH and obesity (2) (by 40.9% respectively), but in group 1 (by 36.7%) of patients with NASH and EH. The analysis of SAP values in the patients of group 2 at night and in the day time indicates the frequent excess of the standard values of SAP at night (by 52.7% versus 32.7% in the day time ($p < 0.05$)). The variability of SAP was increased in both groups, the maximum values were observed in group 2 (34.5% versus 21.4% in the 1st one). The patients with obesity and NASH without the second stage EH also had increased immune response of SAP by 1.8 times ($p < 0.05$)

compared to the normal values.

Conclusion. The course of the second stage EH combined with obesity and nonalcoholic steatohepatitis is characterized by prevailed second stage arterial hypertension (60,0%), SAP rises mostly at night (by 52,7% versus 32,7% in the day time ($p < 0,05$)), the variability of SAP is higher in the day time (34,5% ($p < 0,05$)) with increasing duration of "load pressure" during the day (by 4.1 times ($p < 0.05$)), monotonous type of the curve and inadequate reduction in systolic and diastolic blood pressure during the night period (predominant «non-dipper» type).