

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ



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METABOLIC DISORDERS IN PATIENTS WITH GOUT

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Introduction. Metabolic disorders in patients with gout at the current stage occupy a leading place.

The aim of the study. To find out frequency of metabolic disorders in patients with gout

Material and methods. 146 patients with gout aged 40-78 years were examined, 86 of them were men. Clinical, laboratory-biochemical, instrumental, radiological methods of diagnosis verification were used.

Results. It was established that in 83 (61,63%) people, gout was manifested against the background of metabolic syndrome. However, the latter in patients under the age of 45 (8 patients) manifested mainly arterial hypertension of the II stage, abdominal obesity, steatohepatosis and insulin resistance, and only in 6 - type 2 diabetes mellitus, as well as significant hyperuricemia ($528,60 \pm 4,13 \mu\text{mol/l}$). Gout was manifested by attacks of acute gouty arthritis or with minimal X-ray changes in the bones of the affected joints, without tophus. At the age of more than 45, especially 65 years, the course was observed mainly according to the type of chronic tophous gout, lesions of the knee and elbow joints were more often observed, relapses of the disease were observed with increasingly less significant provoking alimentary defects and under the action of minimal physical provoking factors.

Metabolic disorders were prominent, with stage II obesity found in two-thirds of patients, and arterial hypertension of grade II commonly observed. Over time, manifestations of coronary heart disease (CHD) and diabetes became more frequent, affecting 24 out of 46 patients (39.23%) in this age group. Additionally, X-ray imaging revealed gouty joint lesions often coexisting with signs of osteoarthritis. With age-related stratification of osteoarthritis, the course of gout became torpid, sometimes there were exacerbations of gout due to the forced use of small doses of aspirin, diuretics for coronary heart disease. Thus, the increased severity of metabolic syndrome exhibited clear signs of comorbidity with gout, necessitating careful consideration of the mutual impact of medications on these conditions. Despite a lower degree of hyperuricemia in this patient group ($357.50 \pm 6.21 \mu\text{mol/L}$), the frequency of gout exacerbations and coronary artery disease (CAD) manifestations significantly increased, highlighting a pattern of mutual aggravation in disease progression.

Conclusions. In the complex treatment of gout, the identified metabolic disorders should be taken into account. Gout has its differences in adults (milder manifestations) and in elderly and senile patients (pronounced manifestations, contributing to more frequent relapses and torpidity of the course, the effect of mutual aggravation of the course with comorbid processes).

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METHODOLOGY FOR ANALYZING AND DEMONSTRATING STUDENTS' HEALTH-PRESERVING COMPETENCE

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Introduction. The most important task of modern education is the upbringing of a healthy generation, the conscious attitude of the individual to his health and the health of others, the formation of physical, moral and mental health, the perceived need for physical improvement, the development of interest and the habit of independent physical education and sports, acquiring knowledge and skills of a healthy lifestyle. During the training, the teacher must pay attention to the performance of movements by students, evaluate them and set new movement tasks in a timely manner. The teacher's remarks and instructions should be such as to accustom students to independent analysis of the performed movements. Training should begin with the types of athletics that are most accessible and necessary for the development of basic physical qualities, such as running. First, it is a run for medium and long distances with a focus on the swing step technique. Having mastered the technique of running for medium and long distances, students begin cross-