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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).

Koshura A.V.

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-

country running, and after that they start running at high and maximum speed, that is, for short distances.

At the same time, students continue to improve the technique of swing step, start, finish, etc. Then they move on to learning the technique of relay running, running with barriers and obstacles. The technique of jumping usually begins to be learned from high jumps, because they make it possible to better master the combination of swing movement with push-off. As one masters the technique of sprinting, they can move on to learning long jumps from a run. The sequence of learning individual methods of long and high jumps can be different.

The aim of the study. To assess the level of health-preserving competence among students, focusing on their knowledge of medical-biological disciplines, physiological aspects of the human body, and motivation for continuous learning in the context of physical education and health.

Material and methods. To achieve the goal, the following research methods were used: theoretical methods, including analysis of data from scientific-methodological literature, regulatory, programmatic-methodological documents, and synthesis of advanced pedagogical practice; empirical methods, including sociological methods (surveying, interviewing), methods for assessing health-preserving competence, and methods of statistical data processing.

Results. The research results showed that a high level of cognitive component manifestation was observed in 11% of third-year students who possess knowledge of the theoretical and practical fundamentals of medical-biological disciplines; are well-informed about the morphofunctional characteristics of the human body in ontogenesis; have precise knowledge of the neurophysiology and physiology of higher nervous activity in adolescents, as well as knowledge of the physiological mechanisms of mental processes and states; and show a strong need for continuous knowledge enhancement. A medium level of cognitive component manifestation is typical for 57% of students. These students possess incomplete knowledge of the theoretical and practical fundamentals of medical-biological disciplines; are insufficiently informed about the morphofunctional characteristics of the human body in ontogenesis; have less accurate knowledge of the neurophysiology and physiology of higher nervous activity in adolescents, as well as the physiological mechanisms of mental processes and states; and show a limited need for continuous knowledge enhancement.

Conclusions. The study results revealed that a high level of manifestation of the cognitive component of health-preserving competence was observed in 11% of second-year students, who are well-informed about the morphofunctional characteristics of the human body in ontogenesis and possess precise knowledge of the neurophysiology and physiology of higher nervous activity in adolescents. A significant proportion of the students surveyed (32%) demonstrated a low level of cognitive component manifestation, with a lack of expressed need for knowledge enhancement and limited understanding of the theoretical and practical fundamentals of medical-biological disciplines.

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FEATURES OF BLOOD LIPID SPECTRUM CORRECTION IN PATIENTS WITH NON-ALCOHOLIC STEATOHEPATITIS AND TYPE 2 DIABETES DEPENDING ON THE STAGE OF DIABETIC KIDNEY DISEASE

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Introduction. Endothelial dysfunction (ED), the most important factors of which are hyperglycemia, dys- and hyperlipidemia, and atherosclerotic vascular damage, occupies a prominent place in the mechanisms of progression of nonalcoholic steatohepatitis (NASH) and diabetic kidney disease (DKD) in patients with type 2 diabetes mellitus (DM2).

The aim of the study. To investigate the effect of the complex of metformin, rosuvastatin, essentiale forte H and quercetin on the state of the lipid spectrum of the blood, which is a factor in the progression of NASH and DKD.