МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ

М А Т Е Р І А Л И

106-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького колективу
БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ
03, 05, 10 лютого 2025 року

Конференція внесена до Реєстру заходів безперервного професійного розвитку, які проводитимуться у 2025 році №1005249

Чернівці – 2025

УДК 61(063)
М 34

Матеріали підсумкової 106-ї науково-практичної конференції з міжнародною участю професорсько-викладацького колективу Буковинського державного медичного університету (м. Чернівці, 03, 05, 10 лютого 2025 р.) – Чернівці: Медуніверситет, 2025. – 450 с. іл.

У збірнику представлені матеріали 106-ї науково-практичної конференції з міжнародною участю професорсько-викладацького колективу Буковинського державного медичного університету (м. Чернівці, 03, 05, 10 лютого 2025 р.) зі стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

Загальна редакція: професор Геруш І.В., професорка Годованець О.І., професор Безрук В.В.

Наукові рецензенти:
професор Батіг В.М.
професор Білоокий В.В.
професор Булик Р.Є.
професор Давиденко І.С.
професор Дейнека С.Є.
професорка Денисенко О.І.
професор Заморський І.І.
професорка Колоскова О.К.
професорка Кравченко О.В.
професорка Пашковська Н.В.
професорка Ткачук С.С.
професорка Тодоріко Л.Д.
професорка Хухліна О.С.
професор Чорноус В.О.

ISBN 978-617-519-135-4

microglobulin based on bibliographical findings points to a lesion of the renal interstitial tissue. As a result of further thorough examination of these patients, we revealed glomerulonephritis in 8 patients (28,6%), interstitial nephritis – in 3 subjects (10,7%), amyloidosis in 3 persons (10,7%). Primary renal dysfunctions were detected in 3 persons (10,7%). While carrying out conventional research methods, renal pathology could be verified only in 9 patients with rheumatoid arthritis with a prolonged antecedent anamnesis. No dependence of the beta-2 microglobulin level on age and gender was revealed.

Conclusion. Carrying out the above-mentioned studies in patients with rheumatoid arthritis will make it possible to improve an early detection of terrible affections on the part of the kidneys, which will contribute to raising the efficacy of treating patients and prolonging their life span.

Kvasnytska O.B.

THE ROLE OF B VITAMINS IN THE TREATMENT OF DIGESTIVE DISEASES

Department of Internal Medicine
Bukovinian State Medical University

Introduction. In Ukraine, about 90% of the population suffers from a deficiency of various vitamins. Food today is not able to satisfy the human need for vitamins, since the amount of nutrients in them is constantly decreasing, therefore, without taking vitamin complexes, the effectiveness of treating many diseases is significantly reduced. Vitamins are not a plastic material or a source of energy but exhibit their activity as coenzymes of various enzymes, participating in the regulation of carbohydrate, protein, fat and mineral metabolism, as well as in the preservation of cellular structures. With normal functioning of the digestive tract, the synthesis of vitamins in the intestines can cover up to 80% of their daily needs

The aim of the study. To analyze the results of scientific and clinical studies on the effectiveness of using B vitamins in the complex treatment of diseases of the digestive system.

Material and methods. Analysis of scientific sources of the electronic database of medical and biological publications PubMED

Results. The advisability of prescribing B vitamins for liver diseases is due to their deficiency in chronic liver damage of viral and toxic etiology. They improve the metabolism of liver cells, namely the processes of decarboxylation and transamination, hydrogen transport and the formation of adenosine triphosphate (ATP) in mitochondria, and regulate protein metabolism. The protein synthetic function of the liver is stimulated at the level of DNA, RNA and polypeptide chain elongation. They influence carbohydrate and carbohydrate metabolism, promoting ATP synthesis and eliminating hypoxia, which is also accompanied by an increase in the resistance of hepatocytes, acceleration of regenerative processes in the liver parenchyma and improvement of its detoxic function. All of these effects prevent the occurrence and development of fibrosis in the liver parenchyma - an important factor in the progression of liver diseases of any etiology.

With intestinal dysbiosis, associative microbial connections are disrupted, which leads to disruption of the synthesis of B vitamins, which contributes to the clinical manifestations of intestinal diseases accompanied by dysbiosis. The prescription of B vitamins for the successful correction of dysbiosis is due to their participation in the metabolism of intestinal microflora, the biosynthesis of neurotransmitters such as acetylcholine, serotonin and γ-aminobutyric acid (GABA). Bacterial GABA influences the motor-evacuation activity of the colon and the regulation of muscle tone. Reduced production of GABA by microbiota and entry into the nervous tissue of the colon contributes to the development of irritable bowel syndrome (IBS). In addition, at the basis of the development of IBS, as well as in the long-term and severe course of chronic non-ulcerative colitis, psychoasthenic syndrome and psycho-emotional reactions are of great importance, which is difficult to correct when using standard basic therapy (selective intestinal antispasmodics, anti-inflammatory drugs, sedatives).

Conclusion. In the complex treatment of diseases of the digestive system, it is advisable to use B vitamins since they play an important biological role not only as general strengthening factors that promote recovery but also as drugs that have a variety of pharmacodynamic effects. It is

advisable to include them in the complex therapy of psychosomatic diseases, especially such as functional disorders of the digestive system, chronic liver damage of viral and toxic etiology, and intestinal diseases.

Nazymok Ye.V.

VARIABILITY OF THE FORMS OF THE SIGMORECTAL COLON AND ITS SIGMORECTAL SEGMENT IN FETUSES AND NEWBORNS

Department of Disaster Medicine and Military Medicine
Bukovinian State Medical University

Introduction. Development of modern pediatric surgery requires comprehensive information about morphological features of the colon in the perinatal period of human ontogenesis. Embryonic changes of the colon and its sigmorectal segment are caused by interrelation of all the structural-functional components between themselves and adjacent abdominal organs. The sigmorectal segment develops synchronically with other portions of the large intestine according to the stages of intestinal rotation and the periods of appearance of physiological hernia (Kozlov V.A., 2006, Vitenok O.Ya., 2012). In the process of the prenatal development, the formation of anatomical parts of the large intestine is associated with the periods of accelerated growth and formation of the intestinal wall structural elements. These periods correspond to the 8^{th}, 13^{th}, 16^{th} and 20^{th} weeks of ontogenesis. During 8-10 months the sigmorectal segment can reach the terminal portion of the colon or sacroiliac joint (Moldavskaya A.A.2006, Proniayev D.V., 2007).

The aim of the study. To examine variable anatomy of the sigmoid colon and development of topographic-anatomical interrelations of the sigmorectal segment in the perinatal period of human ontogenesis.

Materials and methods. The study was carried out on 79 samples of fetuses and human newborns without any external signs of anatomical deviations or defects. The methods of macro- and micro-preparation, morphometry, photo registration, injections of the arterial vessels, and statistical were applied.

Results. During the 2^{nd} trimester of the intrauterine development, the shape of the sigmoid colon possesses the utmost individual changeability. We have found C-, U-, Ω-shaped intestine, in the form of an inverted letter V, hook-like, spiral-shaped, and zigzag-shaped. The majority of fetuses (26,6 %) had C-like shape of the sigmoid colon. Fetuses with a dolichomorphic body type have a short sigmoid colon C-like and U-like in shape. Those with a brachiomorphic type have a long spiral-shaped sigmoid colon. In the dynamics of the 3^{rd} trimester, the shape of the sigmoid colon changes. The samples with spiral-shaped (38,8 %) and zigzag-shaped (25,8 %) sigmoid colon are found more often. Although, Ω-shaped and sigmoid colon in the form of an inverted letter V are not found. Variability of the anatomical forms of the sigmoid colon is caused by unequal development of the colon portions and the type of the body. The dolichomorphic body type has a short sigmoid colon C-like and U-like in shape. The brachiomorphic type has a long spiral-shaped and zigzag-shaped sigmoid colon. The sigmoid colon of newborns most often (77,8 %) is spiral-shaped, rarely (22,2 %) – zigzag-shaped. Newborns with a brachiomorphic body type have long spiral-shaped and zigzag-shaped sigmoid colon. Newborns with a brachiomorphic body type have short sigmoid colon.

In the dynamics of the 3^{rd} trimester of the intrauterine development, accelerated growth of the sigmoid colon occurs longitudinally, and the diameter of the sigmorectal segment components becomes longer. The major macroscopic and microscopic signs of the sigmorectal segment in the perinatal period are: narrowing of the intestinal tube in the point of transforming of the sigmoid colon into the rectum; the absence of protrusions and fatty appendages within the sigmorectal segment; continuation of the sigmoid colon tapes into the solid longitudinal muscle layer of the rectum; availability of the semicircular fold of the mucous membrane located transversally to the intestinal axis. Absolute signs of the anatomical border between the sigmoid colon and rectum are the features of the myo- and angioarchitectonics of the distal portions of the large intestine.

Conclusions. Topographic-anatomical interrelations of the sigmorectal segment in the