

МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ



МАТЕРІАЛИ
106-ї підсумкової науково-практичної конференції
з міжнародною участю
професорсько-викладацького колективу
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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.

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perinatal period of human ontogenesis depend on the shape of the sigmoid colon. The shape of the sigmoid colon possesses individual anatomical variability. The 3rd trimester is a critical period, since accelerated growth of the sigmoid colon occurs.

Nemish I.L.

FEATURES OF RHYTHM AND CONDUCTION DISTURBANCES IN CHRONIC CORONARY SYNDROME, CHRONIC OBSTRUCTIVE PULMONARY DISEASE AND OBESE PATIENTS

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Introduction. The topic of studying rhythm and conduction disorders in patients with chronic coronary syndrome (CCS), chronic obstructive pulmonary disease (COPD) and obesity is important due to the fact that the presence of obesity increases the load on the heart, which is increased by the concomitant presence of chronic hypoxia in COPD, which leads to more frequent and severe rhythm and conduction disturbances in this group of patients.

The aim of our study. To compare the rhythm and conduction in CCS, COPD and obese patients with CCS and obese patients, COPD and normal body weight patients, CCS, COPD with excess body weight patients and investigate the effect of ranolazine in combination with basis therapy on the quality of life of CCS, COPD, and obese patients.

Material and methods. 110 patients were examined depending on the body mass index (BMI), the presence of CCS or COPD. All of them were divided into: group 1 – 22 CCS and obese patients, group 2 – 22 COPD and normal body weight patients, group 3 – 22 CCS, COPD and normal body weight subjects, group 4 – 22 CCS, COPD and overweight and group 5 – 22 CCS, COPD and obese patients. CCS, COPD and obese patients were also divided into two subgroups: control group - 11 patients were prescribed standard therapy, treatment group - 11 patients were given ranolazine in a dose of 500 mg 2 times a day in the basic treatment for 1 month. ECG recording was performed using a 12-channel electrocardiograph YuKARD-200 (UTAS, Ukraine). Verification of the clinical diagnosis of CCS was carried out in accordance with the European Society of Cardiology recommendations 2019. Confirmation of the COPD diagnosis was carried out in accordance with GOLD 2021.

Results. As a result of the analysis of rhythm and conduction disturbances in the experimental groups, it was established that sinus tachycardia was most often found in CCS, COPD and obese patients, while its frequency was 4.5 times ($p<0.05$) higher in this group of patients when compared with a group of COPD and normal body weight participants. A tendency to a higher frequency of ventricular extrasystoles in the group of CCS, COPD and obese patients was also noted. When examining the patients of the main group with rhythm and conduction disorders, positive ECG dynamics were noted (a decrease in the number of supraventricular extrasystoles in 3 patients and ventricular extrasystoles in 4 patients).

Conclusions. Ranolazine is an effective and safe treatment for arrhythmias in CCS, COPD and obese patients, helping to reduce the risk of cardiac complications without worsening the general condition or causing side effects on the respiratory system or metabolism.

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METABOLIC SYNDROME AND ASSOCIATED FACTORS IN PATIENTS WITH PSORIATIC ARTHRITIS

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Introduction. In Ukraine, the prevalence of psoriasis is estimated to be around 2–3% of the population, which aligns with global trends. Given that Ukraine has a population of approximately 40 million people, this suggests that about 1.2 million people in Ukraine are affected by psoriasis. Psoriatic arthritis (PsA) affects between 13.5% and 47% of individuals with psoriasis. PsA can lead to significant issues, such as temporary or permanent disability and a decline in both physical and