

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ**



МАТЕРІАЛИ

**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.

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ISBN 978-617-519-135-4

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THE ROLE OF INFECTIOUS AGENTS IN THE DEVELOPMENT OF PRECANCEROUS CERVICAL PATHOLOGY

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Introduction. Although human papillomavirus (HPV) is the most common cause of cervical cancer, it is not the only etiological factor. Cervical neoplasia is also associated with bacterial agents such as *Chl. trachomatis*, *N. gonorrhoeae*, *M. hominis*, and *Ureaplasma spp.* (H. Ye, T. Song, 2018, J. Smith, 2022). It is known that sexually transmitted infections (STIs) are significantly linked to an increased incidence of cervical cancer (Abebe M, 2022).

Genital infections caused by *Chlamydia trachomatis* (CT) are recognized as a serious health problem. CT is associated with adverse effects on female reproduction and is linked to cervical hypertrophy and squamous metaplasia, indicating a potential connection to HPV infection (Silva, J.2022).

The aim of the study. To study the role and structure of infectious (bacterial) agents in the development of precancerous cervical pathology to improve the effectiveness of treatment for this condition.

Material and methods. A comprehensive examination of 64 women of a reproductive age was conducted. The patients had confirmed cases of precancerous cervical pathology (mild and moderate dysplasia – cervical intraepithelial neoplasia grade 1 (CIN 1) and CIN 2, respectively) diagnosed through objective examination. Cervical examinations using specula, simple and extended colposcopy, cytological diagnostic methods, and cervical biopsy with subsequent histological examination were performed as indicated. The species spectrum of vaginal and cervical canal microflora was studied in these patients. The presence of pathogenic and conditionally pathogenic bacterial microflora was determined, including STI agents (CT, *Trichomonas*, *Gardnerella*, *Mycoplasma*, *Ureaplasma*, viral agents (herpes simplex virus, type II)).

Diagnostic methods included bacterioscopic examination (Gram staining), bacteriological examination with determination of microbial count and antibiotic sensitivity, polymerase chain reaction and direct immunofluorescence reaction. For conditionally pathogenic microflora, mycoplasmas, and ureaplasmas, a microbial count >10⁴ was considered etiologically significant.

Results. Chlamydia was detected in 23 women (35.9%), *Trichomonas* in 46 (71.9%) patients; myco-ureaplasma infection in 18 (28.1%) and in 11 (17.2%) cases, respectively. Herpes virus (type 2) was present in 8 patients - 12.5%. Bacterial conditionally pathogenic microflora (*S. aureus*, *E. faecalis*, *E. coli*, *P. vulgaris*) was present in 42 - 65.6% of cases.

The majority of patients had associations of microorganisms (81.2% of women). Thus, in patients with precancerous cervical pathology, an infectious factor was identified in 100% of cases – all women. Persistence of high-risk oncogenic papillomavirus was present in 33 (51.6%) cases, emphasizing the role of not only HPV in the development of cervical dysplastic processes but also pathogenic and conditionally pathogenic bacterial microflora and sexually transmitted infections.

Conclusions. At the diagnostic stage for patients with precancerous cervical pathology, it is mandatory to examine them for sexually transmitted infections and high-risk oncogenic HPV DNA. Treatment for this category of patients should be phased, starting with the treatment of genital infections.

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THE EFFECT OF PREECLAMPSIA ON THE WORK OF THE HEART DURING PREGNANCY

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Introduction. Pregnancy, which is considered as a stress test of the hemodynamic system, can exacerbate already existing heart diseases. Pregnancy can also contribute to heart disease. NT-proBNP is a useful biomarker for the diagnosis of heart failure in pregnant women. Elevation of