

**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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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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Conclusions. A combined use of quercetin granules and low-intensity laser therapy in lichen ruber planus patients against the background of standard therapy leads to a more pronounced positive dynamics of oxidative stress indicators compared to the use of a drug containing antioxidant quercetin only.

Denysenko O.I.

ANALYSIS OF THE REMOTE RESULTS OF TREATMENT OF PATIENTS WITH ALLERGODERMATOSES USING AN ANGIOPROTECTIVE DRUG, MULTIPROBIOTIC AND TOPICAL CALCINEURIN INHIBITOR

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Introduction. Optimizing the treatment of patients with allergic dermatoses is a relevant task of modern dermatovenerology. Allergodermatoses are a common group of allergic skin diseases, which in recent years have a tendency to a more severe clinical course with widespread skin damage, frequent relapses, and the development of resistance to basic treatment means. It results in the reduction of patients' work capacity and social activity and justifies the relevance of increasing the effectiveness of their treatment. Allergic dermatoses are found to be multifactorial diseases. Changes in the immune and endocrine regulation, intestinal dysbiosis, disorders of skin microcirculation, etc., are important in their development, which should be taken into account when prescribing a comprehensive therapy to such patients.

The aim of the study. To evaluate the remote results of the comprehensive treatment of patients with allergic dermatoses using a multiprobiotic, an angioprotective drug, and a topical calcineurin inhibitor.

Material and methods. 67 patients with allergic dermatoses (36 men, 31 women) aged from 19 to 78 years were examined. Eczema was diagnosed in 51 patients (true eczema in 19; microbial forms of eczema in 32), and atopic dermatitis (exudative or lichenoid forms) in 16. In the process of work, microbiological (determining the state of the colon microbiota) and statistical research methods were used. The effectiveness of the treatment of patients was evaluated by the duration of their treatment, the term of the state of clinical remission and the number of relapses of allergic dermatoses during a year.

Results. In the majority of the examined patients with allergic dermatoses (51 (76.1%) out of 67 individuals), mainly in patients with microbial forms of eczema, changes in the qualitative and quantitative indicators of the colon microbiota with signs of dysbiosis of varying degrees of severity were found: more often II and III degrees (in 31.3% and 26.9% of patients respectively). In the course of treatment, patients with allergic dermatoses were divided into two groups. The comparative group included 34 patients who received a standard treatment, and the main group - 33 patients who took a multi-probiotic (containing bifidobacteria, lactococci, lactobacilli, propionic acid and acetic acid bacteria) against the background of standard therapy. Additionally, an angioprotective drug containing diosmin and hesperidin was administered. After regression of skin rash, in order to prevent the development of relapses of allergic dermatoses, a topical calcineurin inhibitor was prescribed for the patients of the main group - 0.1% tacrolimus ointment, which has an anti-inflammatory and immunosuppressive effect lasting up to 12 months. According to clinical observations, in patients with allergic dermatoses from the main group, the elements of the rash regressed earlier with a reduction in the duration of their treatment (on an average by 4-6 days), a tendency towards normalization of the colon microbiota was found, and the clinical condition of allergic dermatoses remission extended (on average up to 8.34 ± 0.61 months; in the comparison group - 4.71 ± 0.37 months, $p < 0.05$) and the number of their exacerbations per year decreased (up to 1.52 ± 0 , 12 times; in the comparative group - 2.74 ± 0.17 times, $p < 0.05$), which indicates a significant improvement in both the immediate and remote results of the treatment of such patients.

Conclusions. Administration of a topical calcineurin inhibitor (0.1% tacrolimus ointment) with an immunosuppressive effect to patients with allergic dermatoses (eczema, atopic dermatitis) with the presence of dysbiosis of the large intestine against the background of standard therapy of a

multiprobiotic, an angioprotective drug containing diosmin and hesperidin, accelerates regression of the clinical manifestations of allergodermatoses, promotes to prolong the state of clinical remission, and prevents the development of relapses of allergodermatoses in such patients.

Fedoruk V.O.

INVESTIGATION OF THE POTENTIAL ENHANCEMENTS IN THE DIAGNOSIS OF THE ETIOLOGICAL FACTORS ASSOCIATED WITH ECZEMA THROUGH THE IMPLEMENTATION OF PATCH TESTING IN PATIENTS

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Introduction. Eczema is a common multifactorial dermatosis that develops on the background of multivalent sensitization to various chemical, biological, and other allergens. Genetic predisposition to allergies, impaired skin barrier function, changes in immune and neuroendocrine regulation, imbalance of prooxidant-antioxidant homeostasis, chronic infection, metabolic disorders, changes in skin microcirculation, etc. play a significant role in the onset and course of eczema. In recent years, eczema has tended to have a more severe clinical course with widespread skin lesions, frequent relapses, and torpidity to basic treatment, which reduces the ability to work, quality of life, and social activity of patients. All of this determines the medical and social significance of eczema and the relevance of optimizing its diagnostic program for clinical and laboratory examination of patients with eczema in order to identify all possible etiopathogenetic factors of dermatosis and develop more effective treatment and prevention measures for such patients.

The aim of the study. Study the possibilities of improving the diagnosis of etiological factors of eczema development and recurrence by conducting patch testing of patients

Materials and methods. In order to identify/clarify exogenous factors that provoke exacerbations of chronic eczema, 18 patients in remission of dermatosis underwent patch testing using standard cutaneous provocative application patch test systems. The European Basic Series S-1000 (Chemotechnique MB Diagnostics AB) was used, which includes a set of 30 most common haptens recommended by the European Environmental and Contact Dermatitis Research Group (EECDRG) for patch testing. The European Basic Series S-1000 (Chemotechnique MB Diagnostics AB) includes a set of 30 of the most common haptens recommended by the European Environmental and Contact Dermatitis Research Group (EECDRG) for patch test diagnosis. The majority of these haptens (quaternium-15, sainte mix III, paraben mix, budesonide, tixocortol-21-pivalate) are found in preservatives in cosmetics and topical medicines, while other haptens are found in personal care products (lanolin alcohol, beech balsam (balsam peru), sodium metabisulfite, formaldehyde), perfumes (fragrance mix: cinnamyl alcohol, cinnamal, hydroxycitronellal, amyl cinnamal, geraniol, eugenol, isoeugenol, oakmoss absolute), textile dyes (textile dye mix (disperse blue 35, disperse orange 1, disperse orange 3, disperse red 1, disperse red 17, disperse yellow 3, disperse blue 106, disperse blue 124), etc.

Results. It was found that among the haptens studied, the following haptens provoke a pronounced positive and weakly expressed reaction in most of the patients examined: C-017A (Cobalt (II) chloride hexahydrate), Mx-30 (Textile dye mix), and P-014 A (Potassium Dichromate), and haptens P-006 (p-PHENYLENEDIAMINE (PPD)) and N-002A (Nickel (II) sulfate hexahydrate) provoke reactions in patients much less frequently, but with a predominance of manifestations of a pronounced positive skin reaction. All of these haptens are common sensitizers that are often used in everyday life and are part of many items that patients come into contact with at work, in their professional activities, or in everyday life, which should be taken into account when developing preventive measures for such patients. It was also noted that the pathological reaction of the skin to patch testing is most often observed in patients with true eczema compared to patients with microbial forms of dermatosis, which should be taken into account in further research to improve the diagnostic program for patients with microbial forms of eczema.