

ABSTRACT&REFERENCES

DOI: 10.15587/2519-4798.2017.97061

IMPROVEMENT OF INDICES OF IMMUNITY OF HIV-INFECTED INDIVIDUALS WITH CHRONIC TOXOPLASMOSIS INFESTATION AND INSUFFICIENT IMMUNE RECONSTITUTION OF ANTIRETROVIRAL THERAPY THROUGH THE USING OF RIBONUCLEIC ACID MEDICATION

p. 4-9

Ihor Hryzhak, PhD, Associate Professor, Department of Infectious Diseases and Epidemiology, SHEE «Ivano-Frankivsk National Medical University», Halyts'ka str., 2, Ivano-Frankivsk, Ukraine, 76018

Email: ihgryzhak@ukr.net

ORCID: <http://orcid.org/0000-0002-5131-0223>

Bohdan Dykyi, MD, Professor, Department of Infectious Diseases and Epidemiology, SHEE «Ivano-Frankivsk National Medical University», Halyts'ka str., 2, Ivano-Frankivsk, Ukraine, 76018

Email: infection@ifnmu.edu.ua

Alexandra Pryshliak, MD, Professor, Head of Department, Department of Infectious Diseases and Epidemiology, SHEE «Ivano-Frankivsk National Medical University», Halyts'ka str., 2, Ivano-Frankivsk, Ukraine, 76018

Email: infection@ifnmu.edu.ua

Roman Ostiak, Head doctor, Director, Ivano-Frankivsk Regional Clinical Infectious Diseases, Ivano-Frankivsk Regional Center of Prevention and Fight against AIDS, Sahaydachnoho str., 66, Ivano-Frankivsk, Ukraine, 76007

Email: infection@ifnmu.edu.ua

Zenovii Tkachuk, PhD, Senior Researcher, Head of laboratory, Laboratory of Molecular Pharmacology, Institute of Molecular Biology and Genetics NAS of Ukraine, Academica Zabolotnoho str., 150, Kyiv, Ukraine, 03143

E-mail: ztkachuk@bigmir.net

Aim of the work. To study the possibility of additional correction of immunologic imbalance by ribonucleic acid medication in HIV-infected persons, infested by *Toxoplasma gondii*, who receive antiretroviral therapy and did not attain immunoreconstitution.

Methods of research. 60 HIV-infected persons, seropositive as to *Toxoplasma gondii* infestation were examined. All patients received antiretroviral therapy (ART) during no less than 6 months, but the number of CD4+T-lymphocytes in them did not exceed 350 kl/ml of blood. The immune-enzyme method was used for determination of titres of specific anti-toxoplasmosis IgG and IgM; general IgM, IgA, IgG, and also IL-2, IL-4, IL-10, INF- γ , TNF-2 α . The number of CD4+ T-lymphocytes was determined by cytofluorimetric method. The one group of 30 persons received ribonucleic acid medication in dose 1500 mg a day during 1-st month and during 2-d and 3-d month - 750 mg a day; other group of 30 patients did not receive medication. The statistical processing was carried out in Excel, using Student t-criterion.

Results. In HIV-infected persons with toxoplasmosis infestation comparing with healthy ones were revealed the increased levels of proinflammatory cytokines - TNF- α ($2,47 \pm 0,11$ pg/ml against $1,90 \pm 0,04$ pg/ml, $P < 0,001$), INF- γ ($10,82 \pm 0,38$ pg/ml against $4,13 \pm 0,12$ pg/ml, $P < 0,001$), and anti-inflammatory ones IL-4 ($1,74 \pm 0,08$ pg/ml against $0,81 \pm 0,09$ pg/ml, $P < 0,001$) and IL-10 ($11,64 \pm 0,31$ pg/ml against $6,70 \pm 0,13$ pg/ml, $P < 0,001$). The persons, who received ribonucleic acid medication comparing with ones, who did not receive it, demonstrated the increase of IL-2 ($2,83 \pm 0,11$ pg/ml against $2,28 \pm 0,11$ pg/ml, $P < 0,001$) and INF- γ ($11,29 \pm 0,25$ pg/ml against $9,98 \pm 0,26$ pg/ml, $P < 0,001$), instead of it TNF- α decreased ($2,25 \pm 0,08$ pg/ml against $2,50 \pm 0,09$ pg/ml, $P < 0,05$). After 3-d month of treatment IL-10 ($7,73 \pm 0,22$ pg/ml against $9,83 \pm 0,30$ pg/ml, $P < 0,001$), TNF- α ($2,23 \pm 0,10$ pg/ml against $2,53 \pm 0,09$ pg/ml, $P < 0,05$) levels decreased, and INF- γ increased ($10,37 \pm 0,11$ pg/ml against $9,86 \pm 0,20$ pg/ml, $P < 0,05$). In the group of patients, who did not receive medication the relapse of toxoplasmatic encephalitis appeared in two cases.

Conclusion. It was established, that HIV-infected persons, with *Toxoplasma gondii* infestation, who took ART but with insufficient immunoreconstruction, demonstrated the increased levels of several proinflammatory (TNF- α , INF- γ) and anti-inflammatory (IL-4, IL-10) cytokines. After the treatment using ribonucleic acid medication the levels of CD4 + T-lymphocytes, IL-2 and INF- γ increased and IL-10 decreased that eliminated the risk of toxoplasmatic encephalitis development

Keywords: HIV-infection, toxoplasmosis infestation, brain toxoplasmosis, immunorehabilitation, antiretroviral therapy, ribonucleic acid medication

References

- Banu, A., Chandrashekara, P., Prabhakar, B., Pavithra, H., Sastri, S. (2011). Immunological failure despite virological suppression in HIV seropositive individuals on antiretroviral therapy. Indian Journal of Sexually Transmitted Diseases and AIDS, 32 (2), 94–98. doi: 10.4103/0253-7184.85412
- Moore, D. M., Hogg, R. S., Yip, B., Wood, E., Tyn dall, M., Braitstein, P., Montaner, J. S. G. (2005). Discordant immunologic and virologic responses to highly active antiretroviral therapy are associated with increased mortality and poor adherence to therapy. JAIDS Journal of Acquired Immune Deficiency Syndromes, 40 (3), 288–293. doi: 10.1097/01.qai.0000182847.38098.d1
- Onen, N., Overton, E., Presti, R., Blair, C., Powderly, W., Mondy, K. (2009). Sub-optimal CD4 recovery on long-term suppressive highly active antiretroviral therapy is associated with favourable outcome. HIV Medicine, 10 (7), 439–446. doi: 10.1111/j.1468-1293.2009.00711.x
- Levy, J. A. (1993). HIV pathogenesis and long-term survival. AIDS, 7 (11), 1401–1410. doi: 10.1097/00002030-199311000-00001
- Sauze, D., Larsen, M., Fastenackels, S., Pauchard, M., Ait-Mohand, H., Schneider, L. et. al. (2011). HIV disease progression despite suppression of viral replication is associated with exhaustion of lymphopoiesis. Blood, 117 (19), 5142–5151. doi: 10.1182/blood-2011-01-331306

6. Miedema, F., Hazenberg, M. D., Tesselaar, K., van Baarle, D., de Boer, R. J., Borghans, J. A. M. (2013). Immune Activation and Collateral Damage in AIDS Pathogenesis. *Frontiers in Immunology*, 4, 298. doi: 10.3389/fimmu.2013.00298
7. Deeks, S. G., Kitchen, C. M. R., Liu, L., Guo, H., Gascon, R., Narvaez, A. B. et. al. (2004). Immune activation set point during early HIV infection predicts subsequent CD4+T-cell changes independent of viral load. *Blood*, 104 (4), 942–947. doi: 10.1182/blood-2003-09-3333
8. Hunt, P. W., Martin, J. N., Sinclair, E., Bredt, B., Hagos, E., Lampiris, H., Deeks, S. G. (2003). T Cell Activation Is Associated with Lower CD4+T Cell Gains in Human Immunodeficiency Virus-Infected Patients with Sustained Viral Suppression during Antiretroviral Therapy. *The Journal of Infectious Diseases*, 187 (10), 1534–1543. doi: 10.1086/374786
9. Douek, D. C., Roederer, M., Koup, R. A. (2009). Emerging Concepts in the Immunopathogenesis of AIDS. *Annual Review of Medicine*, 60 (1), 471–484. doi: 10.1146/annurev.med.60.041807.123549
10. Kim, S. K., Fouts, A. E., Boothroyd, J. C. (2007). Toxoplasma gondii dysregulates IFN-gamma-inducible gene expression in human fibroblasts: insights from a genome-wide transcriptional profiling. *The Journal of Immunology*, 178 (8), 5154–5165. doi: 10.4049/jimmunol.178.8.5154
11. Lang, C., Algner, M., Beinert, N., Groß, U., Luder, C. G. K. (2006). Diverse mechanisms employed by Toxoplasma gondii to inhibit IFN-γ-induced major histocompatibility complex class II gene expression. *Microbes and Infection*, 8 (8), 1994–2005. doi: 10.1016/j.micinf.2006.02.031
12. Luder, C. G., Walter, W., Beuerle, B., Maeurer, M. J., Gross, U. (2001). Toxoplasma gondii down-regulates MHC class II gene expression and antigen presentation by murine macrophages via interference with nuclear translocation of STAT1alpha. *European Journal of Immunology*, 31 (5), 1475–1484. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/11465104> doi: 10.1002/1521-4141(200105)31:5<1475::aid-immu1475>3.0.co;2-c
13. Adams, L. B., Hibbs, J. B., Taintor, R. R., Krahenbuhl, J. L. (1990). Microbiostatic effect of murine-activated macrophages for Toxoplasma gondii. Role for synthesis of inorganic nitrogen oxides from L-arginine. *Journal of Immunology*, 144 (7), 2725–2729. Available at: <http://www.jimmunol.org/content/144/7/2725>
14. Jun, C. D., Kim, S. H., Soh, C. T., Kang, S. S., Chung, H. T. (1993). Nitric Oxide Mediates the Toxoplasmastatic Activity of Murine Microglial Cells in vitro. *Immunological Investigations*, 22 (8), 487–501. doi: 10.3109/08820139309084178
15. Chao, C. C., Anderson, W. R., Hu, S., Gekker, G., Martella, A., Peterson, P. K. (1993). Activated microglia inhibit multiplication of Toxoplasma gondii via a nitric oxide mechanism. *Clinical Immunology and Immunopathology*, 67 (2), 178–183. doi: 10.1006/clin.1993.1062
16. Koide, M., Kawahara, Y., Tsuda, T., Yokoyama, M. (1993). Cytokine-induced expression of an inducible type of nitric oxide synthase gene in cultured vascular smooth muscle cells. *FEBS Letters*, 318 (3), 213–217. doi: 10.1016/0014-5793(93)80514-u
17. Langermans, J. A., Hulst Vander, M. E., Nibbering, P. H., Hiemstra, P. S., Fransen, L., Van Furth, R. (1992). IFN-gamma-induced L-arginine-dependent toxoplasmastatic activity in murine peritoneal macrophages is mediated by endogenous tumor necrosis factor-alpha. *Journal of Immunology*, 148 (2), 568–574. Available at: <https://www.ncbi.nlm.nih.gov/pubmed/1729374>
18. Zhao, Y., Ferguson, D. J. P., Wilson, D. C., Howard, J. C., Sibley, L. D., Yap, G. S. (2009). Virulent Toxoplasma gondii evade immunity-related GTPase-mediated parasite vacuole disruption within primed macrophages. *The Journal of Immunology*, 182 (6), 3775–3781. Available at: <http://www.jimmunol.org/content/182/6/3775> doi: 10.4049/jimmunol.0804190
19. Khan, I. A., Matsuura, T., Kasper, L. H. (1995). IL-10 mediates immunosuppression following primary infection with Toxoplasma gondii in mice. *Parasite Immunology*, 17 (4), 185–195. Available at: <http://onlinelibrary.wiley.com/doi/10.1111/j.1365-3024.1995.tb00888.x/abstract> doi: 10.1111/j.1365-3024.1995.tb00888.x
20. Said, E. A., Dupuy, F. P., Trautmann, L., Zhang, Y., Shi, Y., El-Far, M. et. al. (2010). Programmed death-1-induced interleukin-10 production by monocytes impairs CD4+T cell activation during HIV infection. *Nature Medicine*, 16 (4), 452–459. doi: 10.1038/nm.2106
21. Poonia, B. (2013). Immunotherapy in HIV Infection. *Journal of Infectious Diseases and Therapy*, 1 (1), 102. doi: 10.4172/2332-0877.1000102
22. Tkachuk, Z. Yu., Yakovenko, T. H. (2006). Vplyv preparativ drizhdzhovoyi RNK na proliferatsiyu stovburovykh klityn kistkovoho mozku myshey pry synhenniy transplantatsiyi [Effect of preparations of yeast RNA on the proliferation of stem cells in the bone marrow of mice syngenic transplantation]. Dop. NAN Ukrayiny [Reports of NAS of Ukraine], 12, 161–166.
23. Tkachuk, Z. Yu., Tkachuk, V. V., Tkachuk, L. V. (2006). Vyvchennia membranostabilizuiuchoi ta protyzapalnoi dii drizhdzhovoi RNK in vivo ta vitro [The study of membrane stabilizing and anti-inflammatory action of yeast RNA in vivo and vitro]. Biopolimery i klityna [Biopolymers and cell], 2, 109–116.
24. Frolov, V. M., Sotska, Ya. A., Kruhlova, O. V., Tkachuk, Z. Yu. (2012). Vplyv protyzavirusnoho preparatu nukleksu na pokaznyky klitynnoi lanki imunitetu u khvorykh na khronichnyi virusnyi hepatit C [The impact of antiviral drug Nukleks on parameters of cellular immunity in patients with chronic hepatitis C]. Ukrayinskyi morfolohichnyi almanakh [Ukrainian morfologic Almanac], 10 (1), 99–105.
25. Dykyj, B., Tkachyk, Z., Gryzhak, I., Kondryn, O., Ostjak, R. (2011). The action of preparation “Nuclex” on virologic and immunological indexes in HIV-infected persons. *SEPSIS*, 1 (4), 103–104.
26. Dykyj, B. M., Hryzhak, I. H., Tkachuk, Z. Yu., Ostyak, R. S., Vaskul, N. V. (2011). Virusno-imunolohichni ta hematolohichni efekty nukleksu u VIL-infikovanykh osib [Viral and immunological and hematological effects of Nukleks in HIV-infected people]. *Infection diseases*, 4 (66), 31–34.
27. Lapach, S. N., Chubenko, A. V., Babich, P. N. (2000). Statisticheskie metody v mediko-biologicheskikh issledovanijah s ispolzovaniem Excel. Kyiv: MORION, 320.
28. Drannyk, H. N. (Ed.) (2006). Klinichna imunolohija i alerholohija [Clinical immunology and allergology]. Kyiv: Polyhraf plius, 482.

DOI: 10.15587/2519-4798.2017.96222

THE STUDY OF FEATURES AND PROSPECTS OF THE INSURANCE MEDICINE IN UKRAINE IN MODERN CONDITIONS

p. 9-15

Liliya Danylchenko, PhD, Associate Professor, Department of social medicine, management and medical law, Odessa National Medical University, Valihovs'kyj lane, 2, Odessa, Ukraine, 65082;

Physio-therapist of highest category, health care, chief physician, Multidisciplinary Medical Center "University Clinic ONMEDU", Tenysta str., 8, Odessa, Ukraine, 65062

E-mail: liliyadanilchenko@i.ua

ORCID: <http://orcid.org/0000-0003-2970-4135>

Introduction. The necessity of development and incipience of insurance medicine in today's realities of Ukrainian health care system is caused by the need in qualified medical care for different groups of population depending on their material prosperity, especially for socially disadvantaged people, in stable healthcare financing, and maintaining of the proper level of medical care. The main task is the study of the modern tendencies of development and predicting of future changes in economic and social environment, as well as their influence on healthcare system. The modern development of social insurance in Ukraine confidently shows that the use of nothing but administrative measures is not enough for adequate work efficiency and reforms.

Statement of research. In fact, there are a number of modern works in the national scientific literature devoted to attempts to consider the theoretical, historical, financial, economic, organizational and administrative aspects of health insurance, but comprehensive analysis of this issue still needs attention of scientists and society in general. This concept allows designing reasonable and substantiated recommendations for health insurance development.

Aim: the study of features and prospects of the insurance medicine system in modern Ukrainian realities.

Results and discussion. The choice of health care model should completely meet the modern requirements in the country. The transition to health insurance should be performed considering the population's wealth level, and possibilities of payment of part of medical services while maintaining the appropriate social protection for disadvantaged populations. Implementation of mandatory insurance is usually accompanied by the insured attachment to a particular territory which the insurance institution serves; also it should determine the procedure for transfer submission to the certain areas to equalize the financial capacity of the different regions. The existing legislation should provide a certain level of health care services profitability, and competition in the medical services market will improve the quality of medical care. In future, it should slowly increase health care costs by financing from many different sources, and medical and diagnostic processes management using standards will make clinical management system closer to self-regulating system.

Conclusion. Improvement of medical care for persons involved in one or another type of medical insurance by implementation of medical insurance system as an independent commodity and

market relations in health care area is the main goal for the current health system in Ukraine

Keywords: insurance medicine, health care organization, organizational and administrative technologies, quality, reform

References

1. Voronenko, Yu. V., Moskalenko, V. F. (2000). Social Medicine and Organization Health Care. Ternopil: Ukrmedknyha, 680.
2. Bilyk, O. I., Kachmarchyk, S. A. (2013). Advantages and disadvantages of introduction compulsory health insurance in Ukraine. Visnyk Natsional'noho universytetu «L'viv's'ka politehnika». Menedzhment ta pidpryjemnyctvo v Ukrayini: etapy stanovlennja i problemy rozvytku, 767, 270–276.
3. Bazilevich, I. O., Filonjuk, O. F., Bazylevych, K. S.; Bazilevich, I. O. (Ed.) (2008). Strahuvannia [Assurance]. Kyiv: Znannia–Pres, 1019.
4. Koval, O. A., Nochvai, O. I. (2014). Problems and prospects of introduction of medical insurance in Ukraine. Efficient Economy, 4. Available at: <http://www.economy.nayka.com.ua/?op=1&z=2905>
5. Karaca-Mandic, P., Jena, A. B., Ross, J. S. (2017). Health and Health Care Use Among Individuals at Risk to Lose Health Insurance With Repeal of the Affordable Care Act. JAMA Internal Medicine. doi: 10.1001/jamainternmed.2016.9541
6. Alekseev, V. A., Vartanian, F. E., Shurandina, J. S. (2009). Health care systems rank from the position of the World Health Organization. Health, 11, 57–67.
7. Grishin, V. V. (2008). The reform of the National Health System. Health, 4, 139–144.
8. Bermutova, K. A. (2012). Obligatory health insurance: perspectives of its implementation in Ukraine. Novyny medytsyny ta farmatsii, 17 (430). Available at: <http://www.mif-ua.com/archive/article/34165>
9. Homer, M. L., Palmer, N. P., Fox, K. P., Armstrong, J., Mandl, K. D. (2017). Predicting Falls in People Aged 65 Years and Older from Insurance Claims. The American Journal of Medicine. doi: 10.1016/j.amjmed.2017.01.003
10. Volobuyev, E. H., Mazharenko, V. A., Priz, Ye. V. (2011). Differentiation ratio of doctors to patients and their relatives. Sotsiologiya meditsiny, 1, 42–46.
11. Vorob'yev, V. P., Vorob'yeva, Ye. Ye. (2009). Problems of formation of health insurance as a social institution. Izvestiya vysshikhuchebnykh zavedeniy. Povolzhskiy region. Obshchestvennye nauki, 3 (3), 88–95.
12. Segel, J. E., Kullgren, J. T. (2017). Health Insurance Deductibles and Their Associations With Out-of-Pocket Spending and Affordability Barriers Among US Adults With Chronic Conditions. JAMA Internal Medicine, 177 (3), 433. doi: 10.1001/jamainternmed.2016.8419
13. Aleksandrova, O. Yu., Grigor'yev, I. Yu., Lebedinets, O. N., Tymoshenkova, T. V. (2008). Quality of care: legal assessment. Problemy upravleniya zdorovokhraneniem, 5 (42), 5–13.
14. Miller, G. E., Vistnes, J., Buettgens, M., Dubay, L. (2017). The availability and marginal costs of dependent employer-sponsored health insurance. International Journal of Health Economics and Management. doi: 10.1007/s10754-016-9210-8
15. Shchepin, O. P., Korotikh, R. V., Shchepin, V. O., Medyk, V. A.; Shchepin, O. P. (Ed.) (2009). Population health

framework for health development. Moscow: Natsional'nyy NII obshchestvennogo zdorov'ya RAMN, 376.

16. Chukhno, I. A., Ovcharenko, A. O. (2016). Problems of implementation of compulsory medical insurance at the present stage in Ukraine. Actual questions of social medicine and health economics in Ukraine. Kharkiv, 146–148.

17. Drobot, Y. V., Borodenko, A. M. (2015). Problems of introduction of compulsory medical insurance in Ukraine and measures for their solution. Financial space, 2 (18), 161–165.

DOI: 10.15587/2519-4798.2017.97026

EFFECACY EVALUATION OF TREATMENT AND REHABILITATION IN PATIENTS WITH THE FIRST PSYCHOTIC EPISODE WITH BIOLOGICAL RHYTHMS

p. 15-19

Liliya Zhyvotovska, MD, Professor, Department of psychiatry, narcology and medical psychology, Ukrainian Medical Stomatological Academy, Shevchenka str., 1, Poltava, Ukraine, 36011

E-mail: liliya_polt@mail.ru

ORCID: <http://orcid.org/0000-0003-1166-1704>

Lesya Bodnar, PhD, Assistant, Department of psychiatry, narcology and medical psychology, Ukrainian Medical Stomatological Academy, Shevchenka str., 1, Poltava, Ukraine, 36011

E-mail: bod.lesya@gmail.com

ORCID: <http://orcid.org/0000-0002-0032-8853>

Vyacheslav Shinder, PhD, Assistant, Department of psychiatry, narcology and medical psychology, Ukrainian Medical Stomatological Academy, Shevchenka str., 1, Poltava, Ukraine, 36011

E-mail: wenzeslav@ya.ru

ORCID: <http://orcid.org/0000-0001-5409-4258>

Dmitriy Boiko, Postgraduate student, Department of psychiatry, narcology and medical psychology, Ukrainian Medical Stomatological Academy, Shevchenka str., 1, Poltava, Ukraine, 36011

E-mail: bojko998@gmail.com

ORCID: <http://orcid.org/0000-0001-7336-0822>

The aim of this research was in evaluation of efficacy of treating-rehabilitating arrangements in patients with the first psychotic episode taking into account biological rhythms.

Materials and methods: The study included 130 patients with the first psychotic episode. The characteristic of biological rhythms was carried out according to Estberg scale, evaluation of life quality according to SF-36 scale.

Results: The psychoeducational program was realized in stages and included informational (explanation to patient and relatives of the necessity to take medicaments and visit doctors, the features of disease manifestation, prognosis), therapeutic (prevention of autoaggressive tendencies), social (overcoming of patient's stigmatization, formation of support by family members) and final stages (formation of new forms of reaction in the case of aggravation). According to the distribution in groups of daily working activity, the psychoeducational arrangements with patients of the first group was realized in second half of day, and with ones of the second and third group – in first half.

Conclusions: As a result of the study it was established, that

the use of clinical protocols of treatment together with psycho-educational program taking into account biological rhythms in patients with the first psychotic episode leads to the improvement of their life quality. So, the further studies in this field are the priority direction in psychiatry to improve the prophylactic, treating and rehabilitating arrangements

Keywords: first psychotic episode, psycho-educational program, biological rhythms, prophylaxis, treatment rehabilitation

References

1. Maruta, N. O., Bacherikov, A. M. (2001). Pershii epizod psihozu (suchasni printsipi diagnostiki ta likuvannya). Kharkiv, 20.
2. Shiers, D. (2004). Early intervention for first episode psychosis. BMJ, 328 (7454), 1451–1452. doi: 10.1136/bmj.328.7454.1451
3. Barrett, E. A., Faerden, A., Nesvag, R., Agartz, I., Romm, K. L., Sundet, K. S., Melle, I. (2008). Patterns of suicidal behavior in first-episode psychosis. Schizophrenia Research, 98, 88. doi: 10.1016/j.schres.2007.12.202
4. Maruta, N. O. (2007). Pervii epizod psihozu (diagnostika, lechenie, organizatsiya pomoschi). Ukrains'kiy visnik psihonevrologiyi, 15 (1 (50)), 21–24.
5. Demchenko, V. A., Zozulya, V. V., Ponomar'ov, S. V. (2009). Klinichni aspekti psihosotsial'noi reabilitatsii pri per-vinnomu psihotichnomu epizodi. Ukrains'kiy visnik psihonevrologiyi, 17 (2 (59)), 94–96.
6. McGorry, P. D. (2007). Early intervention in psychotic disorders: detection and treatment of the first episode and the critical early stages. Med. J. Aust., 187, 8–10.
7. Sonnik, G. T., Skripnikov, A. N., Rud', V. A. (2012). Bioritmologicheskie issledovaniya v psichiatrii: costoyanie i perspektivi razvitiya. Psihiatriya, psihoterapiya i klinicheskaya psihologiya, 1, 89–95.
8. Rud, V. O., Fisun, Yu. O. (2010). Doslidzhennya tsirkadiannogo desinhronezu u suitsidentiv. Ukrains'kiy visnik psihonevrologiyi, 18 (2 (63)), 74–77.
9. Nakaz MOZ Ukrayny „Klinichnyi protokol nadannia medychnoi dopomohy khvoryym na shyzofreniu” (2007). MOZ Ukrayny, No. 59.
10. Maruta, N. A., Kozhina, A. M., Kolyadko, S. P. (2015). Rol' psihobrazovaniya v kompleksnom lechenii bol'nih s rekurrentnym depressivnym rasstroistvom. Ukrains'kiy visnik psihonevrologiyi, 23 (4 (86)), 53–57.
11. Mihailov, B. V., Mazhbits, V. B. (2011). Biopsihosotsial'naya model' reabilitatsii bol'nih shizofreniei. Ukrains'kiy visnik psihonevrologiyi, 19 (2 (67)), 52–54.

DOI: 10.15587/2519-4798.2017.96422

THE ANALYSIS OF COMORBIDITIES IN GERIATRIC PATIENTS WITH PROXIMAL FEMUR FRACTURE

p. 20-23

Andrii Kalchenko, Postgraduate student, Department of traumatology, anesthesiology and war surgery, Kharkiv Medical Academy of Postgraduate Education, Amosova str., 58, Kharkiv, Ukraine, 61176

E-mail: didandrij@ukr.net

ORCID: <http://orcid.org/0000-0003-1970-9362>

Vladimir Babalyan, PhD, Associate Professor, Department of traumatology, anesthesiology and war surgery, Kharkiv Medical Academy of Postgraduate Education, Amosova str., 58, Kharkiv, Ukraine, 61176

E-mail: babalyanvladimir@gmail.com

Alexander Khvysuk, MD, Professor, Rector, Department of traumatology, anesthesiology and war surgery, Kharkiv Medical Academy of Postgraduate Education, Amosova str., 58, Kharkiv, Ukraine, 61176

Tamara Hurbanova, Postgraduate student, Department of traumatology, anesthesiology and war surgery, Kharkiv Medical Academy of Postgraduate Education, Amosova str., 58, Kharkiv, Ukraine, 61176;

Head of Department, Department of Traumatology, Kharkiv City Clinical Multiprofile Hospital No. 17, Moskovs'kyy ave., 195, Kharkiv, Ukraine, 60137

E-mail: tamaragurbanova1@rambler.ru

Dmitriy Cherepov, Assistant, Department of traumatology, anesthesiology and war surgery, Kharkiv Medical Academy of Postgraduate Education, Amosova str., 58, Kharkiv, Ukraine, 61176;

Head doctor, Kharkiv City Clinical Multiprofile Hospital No. 17, Moskovs'kyy ave., 195, Kharkiv, Ukraine, 60137

Sergiy Maznyakov, Laboratory assistant, Department of traumatology, anesthesiology and war surgery, Kharkiv Medical Academy of Postgraduate Education, Amosova str., 58, Kharkiv, Ukraine, 61176

E-mail: maznyakov83@mail.ru

The frequency of proximal femur fractures is 35–40 % in the structure of different skeletal fractures. Elderly people, usually having several somatic diseases, are the main contingent of patients with fractures of this localization. Comorbidities and general condition of patients should be considered for treatment strategy determination.

Aim. To study comorbidities structure in geriatric patients with proximal femur fractures and to estimate comorbidities influence on the choice of the treatment strategy.

Materials and methods. 568 case histories of patients, hospitalized in the trauma department of Kharkiv clinical multi-field hospital № 17 with proximal femur fractures during 2008–2014, were analyzed.

Results. Most of the patients had low energy trauma. 568 patients were included in the research; 205 (36.09 %) of them were males, and 363 (63.91 %) – females. The age of patients ranged from 62 to 97 (the average age 79.2 ± 9.1). Comorbidities were found in 378 patients (66.5 %). The time from the moment of injury to hospitalization ranged from 30 minutes to 4 weeks (25 hours on the average). The average number of bed capacity was 17 days (from 1 to 84 days). In 72.7 % of cases coronary heart disease was found, in 47.6 % - hypertension, and diabetes mellitus – in 10.8 %. One comorbidity was found in 131 patients (34.65 %), two comorbidities – in 153 patients (40.47 %), three or more was found in 84 patients (22.22 %). The surgical treatment was applied in 29.57 % of cases, conservative – in 70.42 % of cases.

Conclusion. The elderly patients in 66.5 % of cases have comorbidities, and cardiovascular pathology is the most common. The patients with the giving fractures need more detailed examination to select the optimal treatment strategy

Keywords: proximal femur, treatment methods, fracture, old age, comorbidities

References

1. Kvitalashvili, O. (Ed.) (2015). Shchorichna dopovid pro stan zdorovia naselennia, sanitarno-epidemichnu sytuatsiu ta rezultaty diialnosti systemy okhorony zdorovia Ukrayiny. 2014 rik. Kyiv, 460.
2. Madridskiy mezhunarodnyy plan deystviy po problemam stareniya 2002 goda (2002). Doklad vtoroj Vsemirnoj assamblei po problemam stareniya. New York: UN, 8.
3. Girshin, S. G. (2004). Klinicheskie lektsii po neotlozhnoy travmatologii. Moscow: Azbuka, 543.
4. Haiko, H. V., Strafun, S. S., Kalashnikov, A. V., Polishko, V. P. (2011). Analiz stanu travmatoloho-ortopedychnoi dopomohy naselenniu Ukrayiny 2009–2010 rr. Kyiv: Volia, 220.
5. Korzh, N. A., Gerasimenko, S. I., Klimovickij, V. G., Loskutov, A. E., Romanenko, K. K., Gerasimenko, A. S., Kolomic, E. N. (2010). Rasprostrannost perelomov kostey i rezulatty ikh lecheniya v Ukraine (kliniko-epidemiologicheskoe issledovanie). Ortopediya, travmatologiya i protezirovaniye, 3, 5–14.
6. Dhanwal, D. K., Cooper, C., Dennison, E. M. (2010). Geographic Variation in Osteoporotic Hip Fracture Incidence: The Growing Importance of Asian Influences in Coming Decades. Journal of Osteoporosis, 2010, 1–5. doi: 10.4061/2010/757102
7. Rizzoli, R., Body, J. J., De Censi, A., Reginster, J. Y., Piscitelli, P., Brandi, M. L. (2012). Guidance for the prevention of bone loss and fractures in postmenopausal women treated with aromatase inhibitors for breast cancer: an ESCEO position paper. Osteoporosis International, 23 (11), 2567–2576. doi: 10.1007/s00198-011-1870-0
8. Ismailov, S. I., Khodzhamberdieva, D. Sh., Rikhsieva, N. T. (2013). Osteoporoz i nizkoenergeticheskie perelomy sheyki bedra kak oslozhnenie razlichnykh endokrinnykh zabolevaniy. Mezhdunarodnyj ehndokrinologicheskij zhurnal, 5, 113–120.
9. Belyakin, S. A., Perekhodov, S. N., Peshekhanov, E. V. (2011). Vliyanie soputstvuyushchikh zabolevaniy na vybor metoda lecheniya pereloma sheyki bedrennoy kosti u postradavshikh pozhilogo i staryeskogo vozrasta. Klinicheskaya gerontologiya, 3-4, 13–17.
10. Shevalaev, G. A., Dudina, Ye. V., Yefremov, I. M. (2011). Komorbidnost u bolnykh 50 let i starshe s perelomom proksimalnogo otdela bedrennoy kosti. Voprosy travmatologii i ortopedii, 1, 31–33.
11. Panday, K., Gona, A., Humphrey, M. B. (2014). Medication-induced osteoporosis: screening and treatment strategies. Therapeutic Advances in Musculoskeletal Disease, 6 (5), 185–202. doi: 10.1177/1759720x14546350
12. Golovach, I. Yu., Zazarnyy, I. M., Turovskaya, T. V. et. al. (2014). Otsenka komorbidnosti u patsientov s perelomom sheyki bedrennoy kosti na fone osteoporoza i posleduyushchim endoprotezirovaniem tazobedrennogo sustava. Ukrainskiy revmatologichniy zhurnal, 3, 23–28.
13. Briot, K., Maravic, M., Roux, C. (2015). Changes in number and incidence of hip fractures over 12 years in France. Bone, 81, 131–137. doi: 10.1016/j.bone.2015.07.009

14. Bijlsma, A. Y., Meskers, C. G. M., Westendorp, R. G. J., Maier, A. B. (2012). Chronology of age-related disease definitions: Osteoporosis and sarcopenia. Ageing Research Reviews, 11 (2), 320–324. doi: 10.1016/j.arr.2012.01.001
15. Abizanda, P., Romero, L., Sanchez-Jurado, P. M., Martinez-Reig, M., Alfonso-Silguero, S. A., Rodriguez-Manas, L. (2014). Age, frailty, disability, institutionalization, multimorbidity or comorbidity. Which are the main targets in older adults? The Journal of Nutrition, Health & Aging, 18 (6), 622–627. doi: 10.1007/s12603-014-0033-3
16. Kornilov, N. V., Gryaznukhin, E. G. (Eds.) (2006). Travmatologiya i ortopediya. Travmy i zabolеваний nizhnjej konechnosti. Vol. 3. Saint Petersburg: Gippokrat, 1053.
17. Shaposhnikov, Yu. G. (Ed.) (1997). Travmatologiya i ortopediya. Vol. 2. Moscow: Meditsina, 592.

DOI: 10.15587/2519-4798.2017.97040

COMPARISON OF KINETICS OF RADIOPHARMACEUTICAL (99m Tc-MDP) IN PATIENTS WITH DEFORMING OSTEOARTHRITIS AND RHEUMATOID ARTHRITIS OF THE HIP JOINTS BY OSTEOSCINTIGRAPHY

p. 24-27

Pavlo Korol, PhD, head of laboratory, Laboratory of Radioisotope Diagnosis, Kyiv city clinical hospital No. 12, Pidvysoc'ko-go str., 4 a, Kyiv, Ukraine, 01103

E-mail: p.korol@online.ua

ORCID: <http://orcid.org/0000-0003-0231-0021>

The aim of this work is determination of kinetics of radiopharmaceutical (99m Tc-MDP) in the nidi of fixation of injured joint structures in patients with deforming osteoarthritis and rheumatoid arthritis of hip joints.

Material and methods of research. The three-phase osteoscintigraphy (3p-OSG) with technetium-methylene diphosphonate (99m Tc-MDP) was carried out according to the standard protocol to 92 patients with deforming osteoarthritis and rheumatoid arthritis of hip joints, among which – 54 women and 38 men, 37–75 years old.

Results. Kinetics of 99m Tc-MDP in the nidi of injured hip joints fixation at rheumatoid arthritis is characterized with statistically reliable prevalence of integral perfusion, retention, specific accumulation of indicator at the stages of 3-P OSG comparing with fixation nidi at deforming osteoarthritis that correlates with the differences of destructive-reparative processes in them.

Conclusions. The increase of intensity of radiopharmaceutical (RP) fixation in pathological nidus at rheumatoid arthritis (RA) as to deforming osteoarthritis (DO) indicated the intensification of arterial blood supply of such nidi as a result of active inflammation, influence of infection agent or increased osteoplastic activity. The integral perfusion in rheumatoid arthritis nidi was essentially more at the expance of the increase of vascular permeability as a result of infection agents affect, activation of the factors of resorption and synthesis of the mineral components of angiogenesis. RP retention increased in the nidi at rheumatoid arthritis that testified to the high extractive ability of such nidi

Keywords: radiopharmaceutical, osteoscintigraphy, deforming osteoarthritis, rheumatoid arthritis, integral perfusion, retention

References

- Epifanov, V. A. (Ed.) (2008). Medicinskaja reabilitacija. Moscow: Medpress-inform, 352.
- Kovalenko, V. M., Bortkevich, O. P. (2005). Osteotrof. Kyiv: Morion, 448.
- Lishmanov, Y. B., Chernova, V. I. (2004). Radionuklidnaja diagnostika dlja prakticheskikh vrachey. Tomsk: STT, 394.
- Rosado-de-Castro, P. H. (2014). Rheumatoid arthritis: Nuclear medicine state-of-the-art imaging. World Journal of Orthopedics, 5 (3), 312. doi: 10.5312/wjo.v5.i3.312
- Mazurov, V. I. (2008). Bolezni sostavov. Sankt-Peterburg: SpecLit, 397.
- De Smet, K. A., Van Der Straeten, C., Van Orsouw, M., Doubi, R., Backers, K., Grammatopoulos, G. (2011). Revisions of Metal-on-Metal Hip Resurfacing: Lessons Learned and Improved Outcome. Orthopedic Clinics of North America, 42 (2), 259–269. doi: 10.1016/j.ocl.2011.01.003
- Kudin, V. Y., Satir, M. V., Noverko, I. V. (2012). Sushasni aspect zastosuvannja trifaznoyi osteoscintigraphii v diagnostici oporno-ruhovogo aparatu. Ukr. Radiol. Jurn, 3 (20), 310–312.
- Stuchin, S. A. (2008). Anatomic Diameter Femoral Heads in Total Hip Arthroplasty: A Preliminary Report. The Journal of Bone and Joint Surgery-American Volume, 90, 52–56. doi: 10.2106/jbjs.h.00690
- Sherbina, O. V. (2010). Odnophotonno-emisiyna kompjuternaya tomographiya: teoretichni aspect i rol v oncologii. Dosiagnenna biologii ta medicine, 1 (15), 45–49.
- Rijik, V. M., Vershinina, D. V., Mihalchenko, O. M., Dudiy, P. F. (2013). Mozhnosti promenevih metodiv diagnostiki u verifikacii rannego revmatoidnogo artritu. Ukrainskiy revmatologichnyi jurnal, 51 (2), 32–38.

DOI: 10.15587/2519-4798.2017.97083

THE IMPACT OF EXOGENOUS L-ARGININE ON CARDIOHAEMODYNAMICS AND HEART RHYTHM VARIABILITY IN PATIENTS WITH CORONARY HEART DISEASE AFTER COMMUNITY-ACQUIRED PNEUMONIA

p. 24-34

Natalia Mykhailovska, MD, Professor, Head of Department, Departement of General Practice – Family Medicine, Zaporizhzhia State Medical University, Mayakovskiy ave., 26, Zaporizhzhia, Ukraine, 69035

E-mail: natalizgmu@rambler.ru

ORCID: <http://orcid.org/0000-0001-6781-9406>

Tamila Kulynych, Assistant, Departement of General Practice – Family Medicine, Zaporizhzhia State Medical University, Mayakovskiy ave., 26, Zaporizhzhia, Ukraine, 69035

E-mail: akul8@ukr.net

ORCID: <http://orcid.org/0000-0001-9453-8749>

Aim of the work: to study the influence of exogenous L-arginine on structural-functional indices of heart, intensity degree of myocardium coronary changes and heart rhythm variability in patients with coronary heart disease after community-acquired pneumonia.

Methods of research: the open prospective study included 60 patients with CHD, exertional angina, 2–3 f.c., who under-

went community-acquired pneumonia of 3 clinical group (men – 34, women – 26, age median 72,50 (66,00; 75,00) years old). All patients underwent clinical examination, included clinical-laboratory methods of examination, two-dimensional echocardiography and impulse-wave dopplerography, daily monitoring of ECG by Holter at admission to hospital and in 3 months. After signing the informed consent, the patients were randomized in 2 groups. Main group included 30 persons, who received L-arginine in addition to basic CHD therapy, 30 patients of control group received only basic therapy.

Results of research: patients of main group at secondary examination in three month demonstrated a tendency to decrease of final-diastolic volume of LV, reliable increase of fraction of left ventricle emission by 4,44 % ($p<0,05$), and decrease of mean pressure in pulmonary artery was more significant (8,33 % vs 2,94 %; $p<0,05$). The inclusion of L-arginine in the scheme of CHD treatment favored the reliable ($p<0,05$) decrease of tachycardia duration by 49,77 %, number of ventricular extrasystoles by 63,2 %, duration of ST segment depression by 56,52 %, increase of general heart rhythm variability (rMSSD – by 70,00 %, TP – by 97,42 %) and decrease of LF/HF index by 11,67 % at the expanse of activity of parasympathetic component comparing with patients, who received only basic therapy.

Conclusions: the addition of L-arginine to the basic therapy in patients with IHD has the positive influence of cardiohemodynamics, favors the decrease of intensity degree of coronary changes and normalization of sympatho-parasympathetic balance of vegetative nervous system

Keywords: coronary heart disease, community-acquired pneumonia, cardiohemodynamics, heart rhythm variability, treatment, L-arginine

References

- Kovalenko, V., Kornatskiy, V. (2016). Problemy zdorov'ia i medychnoi dopomogy ta model pokrashchennia v sushasnykh umovakh [The problems of health and health care and it's improvement model in modern conditions]. Kyiv, 260.
- Lynnyck, M., Nedospasova, O., Tarasenko, O., Bushura, I., Nikiforova, L. (2016). Porivnialni dani pro rozpozvsiudnenist khvorob organiv dykhannia i medychnu dopomogu khvorym na khvoroby pulmonologichnogo ta alergologichnogo profiliu v Ukraini za 2009–2015 rr [Comparative data on the prevalence of respiratory diseases and medical care for patients with pulmonary and allergy profile diseases in Ukraine for 2009–2015 years]. Kyiv: Lira-K, 48.
- Corrales-Medina, V. F., Suh, K. N., Rose, G., Chirinos, J. A., Doucette, S., Cameron, D. W., Fergusson, D. A. (2011). Cardiac Complications in Patients with Community-Acquired Pneumonia: A Systematic Review and Meta-Analysis of Observational Studies. PLoS Medicine, 8 (6), e1001048. doi: 10.1371/journal.pmed.1001048
- Corrales-Medina, V. F., Musher, D. M., Shachkina, S., Chirinos, J. A. (2013). Acute pneumonia and the cardiovascular system. The Lancet, 381 (9865), 496–505. doi: 10.1016/s0140-6736(12)61266-5
- Kurilets, L. O. (2010). Osoblyvosti tsentralnoi hemodynamiki ta funktsii zovnishnyogo dykhannia u khvorykh na negositalnu pnevmoniu 3 ta 4 grupy iz suputniyu IHS [The features of central hemodynamics and respiratory function in patients with community acquired pneumonia 3 and 4 groups and concomitant coronary artery disease]. Zaporozhye medical journal, 12 (3), 21–23.
- Yildirim, B., Biteker, F. S., Basaran, O., Alatas, O. D., Acar, E., Sozen, H. et. al. (2015). Is there a potential role for echocardiography in adult patients with CAP? The American Journal of Emergency Medicine, 33 (11), 1672–1676. doi: 10.1016/j.ajem.2015.06.036
7. Heart Rate Variability: Standards of Measurement, Physiological Interpretation, and Clinical Use (1996). Circulation, 93 (5), 1043–1065. doi: 10.1161/01.cir.93.5.1043
- Mykhailovska, N. S., Kulynych, T. O., Grytsay, G. V. (2014). Klinichnyi perebig, neirohumoralni ta hemodynamichni zminy u khvorykh na stabilnu stenokardiu napruzhennia na tli negositalnoi pnevmonii [Clinical course, neurohumoral and hemodynamic disorders in patients with stable angina pectoris on the background of community-acquired pneumonia]. Pathologia, 2 (31), 55–59.
- Ostrovskiy, M., Varunkiv, O. (2013). Vplyv patogenetychno-obgruntovanoi medykamentoznoi terapii negositalnoi pnevmonii na tli ishemichnoi khvoroby sertsia v osib, infikovanyh Chlamydophila pnevmonia, na endobronhialni factory nespetsyfichnoi resistentnosti ta lokalnu imunnu vidpovid [The impact of pathogenesis-based drug therapy on endobronchial factors for non-specific resistance and a local immune response in patients with community-acquired pneumonia and coronary heart disease, infected with Chlamydophila pneumonia]. Ukrainskyi pulmonologichnyi zhurnal, 3, 63–67.
10. Regulatory and directives documents of the Ministry of Health of Ukraine. Available at: <http://mozdocs.kiev.ua/likiview.php?id=33730>
- Alyavi, A., Kamilova, U., Tulyaganova, D., Kayumova, N., Rajabova, D., Toshev, B. (2016). GW27-e0520 Influence of Tivortin on hemodynamic parameters in patients with coronary heart disease. Journal of the American College of Cardiology, 68 (16), C84. doi: 10.1016/j.jacc.2016.07.317
- Bocch, E. A., De Moraes, A. V., Esteves-Filho, A., Bacal, F., Auler, J. O., Carmona, M. J. et. al. (2000). L-Arginine reduces heart rate and improves hemodynamics in severe congestive heart failure. Clinical Cardiology, 23 (3), 205–210. doi: 10.1002/clc.4960230314
- Orea-Tejeda, A., Orozco-Gutierrez, J. J., Castillo-Martinez, L., Keirns-Davies, C., Montano-Hernandez, P., Vazquez-Diaz, O. et. al. (2012). Vliyanie L-arginina I tsitrellina na funktsii endotelia sosudov u patsientov s serdechnoi nedostatochnostiu s sokhranennoi fraktsiei levogo zheludochka serdtsa [The effect of L-arginine and citrulline to vascular endothelial function in patients with heart failure with preserved ejection fraction of the left ventricle]. Terapia, 5, 44–48.
- Nagaya, N., Uematsu, M., Oya, H., Sato, N., Sakamaki, F., Kyotani, S. (2001). Short-term Oral Administration of L-Arginine Improves Hemodynamics and Exercise Capacity in Patients with Precapillary Pulmonary Hypertension. American Journal of Respiratory and Critical Care Medicine, 163 (4), 887–891. doi: 10.1164/ajrccm.163.4.2007116
- Kraydashenko, O., Shalmina, M. (2012). Endoteliyoposredovanyi effect tivortina u bolnyh s ishemicheskoy bolezniu serdtsa pozhilogo i starcheskogo vozrasta [Anti-ischemic effect of Tivortin in elderly patients with coronary heart disease]. Visnyk problem biologii i meditsiny, 2 (2), 105–109.

16. Lee, C.-W., Li, D., Channon, K. M., Paterson, D. J. (2009). L-arginine supplementation reduces cardiac noradrenergic neurotransmission in spontaneously hypertensive rats. *Journal of Molecular and Cellular Cardiology*, 47 (1), 149–155. doi: 10.1016/j.yjmcc.2009.03.023
17. Lutay, M., Bugaenko, V., Moiseenko, O. et al. (2011). Znachennia L-argininu v likuvanni khvoryh iz sertsevo-sudynnoi patologieiu [The role of L-arginine in patients with cardiovascular disorders]. Ukrainskiy kardiologicheskiy zhurnal, 4, 96–107.
18. Konopleva, L. F., Andreev, E. V. (2010). L-arginin pri ishemicheskoi bolezni sedtsa: issledovaniya prodolzhaiutsia [L-arginine in patients with coronary heart disease: study continues]. *Therapia*, 10 (51), 64–68.
19. Tousoulis, D., Boger, R. H., Antoniades, C., Siasos, G., Stefanadi, E., Stefanadis, C. (2007). Mechanisms of Disease: L-arginine in coronary atherosclerosis – a clinical perspective. *Nature Clinical Practice Cardiovascular Medicine*, 4 (5), 274–283. doi: 10.1038/npcardio0878
20. Kulynych, T. O. (2017). Klinichna efektyvnist zastosuvannia eksogennogo L-argininu v likuvanni khvorykh na ishemichnu khvorobu serdtsia, yaki perenesly negospitalnu pnevmoniu [Clinical effectiveness of exogenous L-arginine in patients with coronary heart disease after community-acquired pneumonia]. *Zaporozhye medical journal*, 19 (1), 9–13.

DOI: 10.15587/2519-4798.2017.97090

ANALYSIS OF SEX HORMONES INFLUENCE ON BIO-CHEMICAL INDICATORS OF HEART STATE IN RATS: CONNECTION WITH HYDROGEN SULFIDE LEVELS IN MIOCARDIUM

p. 35-38

Andrii Melnik, PhD, Associate Professor, Department of Biological and General chemistry, National Pirogov Medical University, Pirogova str., 56, Vinnytsya, Ukraine, 21018

E-mail: anderneting@gmail.com

ORCID: <http://orcid.org/0000-0003-1315-7958>

Nataliia Zaichko, MD, Associate Professor, Department of Biological and General chemistry, National Pirogov Medical University, Pirogova str., 56, Vinnytsya, Ukraine, 21018

E-mail: zaichkonv@gmail.com

ORCID: <http://orcid.org/0000-0003-1889-6151>

Sergii Kachula, PhD, Associate Professor, Department of Biological and General chemistry, National Pirogov Medical University, Pirogova str., 56, Vinnytsya, Ukraine, 21018

E-mail: serge3470@gmail.com

ORCID: <http://orcid.org/0000-0001-7925-6348>

Olena Strutynska, Assistant, Department of Biological and General chemistry, National Pirogov Medical University, Pirogova str., 56, Vinnytsya, Ukraine, 21018

E-mail: str.lena@i.ua

ORCID: <http://orcid.org/0000-0003-1437-3812>

The aim of the work was to study the influence of different saturation of male and female rats' organism with sex hormones on the parameters of pro-antioxidant system in heart and to assess their connection with the level of hydrogen sulfide in myocardium.

Methods of research: The experiments were realized on 60 laboratory rats of both sexes. The experimental modeling of sex hormones level in rats' organism was carried out by castration of animals under calypso anesthesia. The alternative hormone therapy in castrated male rats was carried out by administration of testosterone propionate, in females – estradiol hemihydrates. In myocardium was determined H_2S content, activity of NAPD-oxidase, superoxide dismutase, level of malondialdehyde and carbonyl groups of protein. The level of testosterone and estradiol was assessed in heparin plasma.

Results of research: H_2S content and superoxidase dismutase activity are reliably less in male myocardium, whereas the activity of NAPD-oxidase, process of lipids and proteins peroxidase is reliably higher than in females. Male castration is attended with reliable increase of H_2S content, superoxide dismutase activity and decrease of NAPD activity, lipids and proteins peroxidation processes activity in myocardium, whereas female castration caused the opposite changes. The alternative therapy with sex hormones approximated the indices to the level of control group of animals.

Conclusions: high content of estradiol and low level of testosterone in blood plasma is associated with the high content of hydrogen sulfide in myocardium that is attended with the low activity of process of lipids and proteins free radical oxidation. The received data testify to the fact that the system of hydrogen sulfide in myocardium is an important factor of gender dimorphism of heart status in rats

Keywords: peroxidation of lipids and proteins, hydrogen sulfide, myocardium, sex hormones

References

1. Sirenko, Iu. M. (2011). Hipertonichna khvoroba i arterialni hipertenzii [Hypertensive disease and arterial hypertension]. Donetsk: Vyd. Zaslavskyi O. Iu., 288.
2. Regitz-Zagrosek, V., Oertelt-Prigione, S., Seeland, U., Hetzer, R. (2010). Sex and Gender Differences in Myocardial Hypertrophy and Heart Failure. *Circulation Journal*, 74 (7), 1265–1273. doi: 10.1253/circj.cj-10-0196
3. Nicholson, C. (2007). Cardiovascular disease in women. *Nursing Standard*, 21 (38), 43–47. doi: 10.7748/ns2007.05.21.38.43.c4563
4. Kimura, H. (2014). Production and Physiological Effects of Hydrogen Sulfide. *Antioxidants & Redox Signaling*, 20 (5), 783–793. doi: 10.1089/ars.2013.5309
5. Melnyk, A. V. (2014). Vplyv testosteronu na produktivitu hidrohen sulfidu v miokardi shchuriv [Influence of testosterone on hydrogen sulfide formation in the myocardium of rats]. *Medychna khimiia*, 16 (4), 22–25.
6. Melnyk, A. V. (2015). Vplyv riznoi naschenosti orhanizmu samok shchuriv estradiolom na utvorennia hidrohen sulfidu v miokardi [Influence of estradiol various saturation in female rats on the hydrogen sulfide formation in the myocardium]. *Medychni perspektyvy*, 20 (1), 21–26.
7. Aloisi, A. M., Ceccarelli, I., Fiorenzani, P. (2003). Gonadectomy Affects Hormonal and Behavioral Responses to Repetitive Nociceptive Stimulation in Male Rats. *Annals of the New York Academy of Sciences*, 1007 (1), 232–237. doi: 10.1196/annals.1286.022
8. Joshi, S., Shaikh, S., Ranpara, S., Khole, V. (2003). Postnatal development and testosterone dependence of a rat ep-

- ididymal protein identified by neonatal tolerization. Reproduction, 125 (4), 495–507. doi: 10.1530/rep.0.1250495
9. Ali, B. H., Ben Ismail, T. H., Basir, A. A. (2001). Sex Difference in the susceptibility of rats to gentamicin nephrotoxicity: influence of gonadectomy and hormonal replacement therapy. Indian Journal of Pharmacology, 33, 369–373.
10. Yuzurihara, M., Ikarashi, Y., Noguchi, M., Kase, Y., Takeda, S., Aburada, M. (2003). Involvement of calcitonin gene-related peptide in elevation of skin temperature in castrated male rats. Urology, 62 (5), 947–951. doi: 10.1016/s0090-4295(03)00587-9
11. Wilinski, B., Wilinski, J., Somogyi, E., Piotrowska, J., Goralska, M., Macura, B. (2011). Carvedilol Induces Endogenous Hydrogen Sulfide Tissue Concentration Changes in Various Mouse Organs. Folia Biologica, 59 (3), 151–155. doi: 10.3409/fb59_3-4.151-155
12. Fukui, T., Ishizaka, N., Rajagopalan, S., Laursen, J. B., Capers, Q., Taylor, W. R. et al. (1997). p22phox mRNA Expression and NADPH Oxidase Activity Are Increased in Aortas From Hypertensive Rats. Circulation Research, 80 (1), 45–51. doi: 10.1161/01.res.80.1.45
13. Kostiuk, V. A., Potapovich, A. I., Kovaleva, Zh. V. (1990). Prostoi i chuvstvitelnyi metod opredeleniya aktivnosti superoksiddismutazy, osnovannyi na reakcii okisleniya kvartetina [A simple, sensitive assay for determination of superoxide dismutase activity based on reaction of quercetin oxidation]. Vopr. med. khimii, 36 (2), 88–91.
14. Vladimirov, Iu. V., Archakov A. I. (1972). Perekisnoe okislenie lipidov v biologicheskikh membranakh [Lipid peroxidation in biological membranes]. Moscow: Nauka, 252.
15. Zaichko, N. V. (2003). Okysliuvalna modyfikatsiya bilkv syrovatky krovi yak marker aktyvnosti revmatoidnogo artrytu ta yii zminy pid vplyvom farmakoterapii amizonom, indometatsynom, nimesulidom [Oxidative modification of serum proteins as a marker of rheumatoid arthritis activity and its changes under the influence of pharmacotherapy amizon, indomethacin, nimesulide]. Visnyk Vinnytskoho derzhavnoho medychnoho universytetu, 7 (2/2), 664–666.
16. Bellanti, F., Matteo, M., Rollo, T., De Rosario, F., Greco, P., Vendemiale, G., Serviddio, G. (2013). Sex hormones modulate circulating antioxidant enzymes: Impact of estrogen therapy. Redox Biology, 1 (1), 340–346. doi: 10.1016/j.redox.2013.05.003
17. Benetti, L. R., Campos, D., Gurgueira, S. A., Vercesi, A. E., Guedes, C. E. V., Santos, K. L. et al. (2013). Hydrogen sulfide inhibits oxidative stress in lungs from allergic mice in vivo. European Journal of Pharmacology, 698 (1-3), 463–469. doi: 10.1016/j.ejphar.2012.11.025
18. Sun, W.-H., Liu, F., Chen, Y., Zhu, Y.-C. (2012). Hydrogen sulfide decreases the levels of ROS by inhibiting mitochondrial complex IV and increasing SOD activities in cardiomyocytes under ischemia/reperfusion. Biochemical and Biophysical Research Communications, 421 (2), 164–169. doi: 10.1016/j.bbrc.2012.03.121
19. Kimura, Y., Kimura, H. (2004). Hydrogen sulfide protects neurons from oxidative stress. FASEB J., 18 (10), 1165–1167. doi: 10.1096/fj.04-1815fje
20. Yang, G., Zhao, K., Ju, Y., Mani, S., Cao, Q., Puukila, S. et al. (2013). Hydrogen Sulfide Protects Against Cellular Senescence via S -Sulphydrilation of Keap1 and Activation of Nrf2. Antioxidants & Redox Signaling, 18 (15), 1906–1919. doi: 10.1089/ars.2012.4645
21. Al-Magableh, M. R., Kemp-Harper, B. K., Ng, H. H., Miller, A. A., Hart, J. L. (2013). Hydrogen sulfide protects endothelial nitric oxide function under conditions of acute oxidative stress in vitro. Naunyn-Schmiedeberg's Archives of Pharmacology, 387 (1), 67–74. doi: 10.1007/s00210-013-0920-x
-
- DOI:** 10.15587/2519-4798.2017.97091
- VARIABILITY OF ARTERIAL PRESSURE IN ACUTE STROKE - A MODERN APPROACH TO THE PROBLEM**
- p. 39-43**
- Tetiana Smotrytska**, Assistant, Department of neurology, Vinnytsia National Pirogov Memorial Medical University, Pyrohova str., 56, Vinnytsia, Ukraine, 21018
E-mail: mediterranean@ukr.net
- Sergiy Moskovko**, MD, Head of department, Department of neurology, Vinnytsia National Pirogov Memorial Medical University, Pyrohova str., 56, Vinnytsia, Ukraine, 21018
E-mail: spmoskovko@gmail.com
- The question of prospects of using the data of variability of arterial pressure as a base of predictor of development, course and consequences of brain stroke is considered on the base of studied literature.*
- Methods of research:** E-data base Medline and PubMed was used for thorough searching for literature on studied questions.
- Results.** The results of scientific literature analysis testify to the connection between variability of arterial pressure and hypertrophy of left ventricle, endothelial dysfunction, development of new cases of auricles fibrillation. According to AP day monitoring, the direct positive connection between the mass index of myocardium of left ventricle and SAP and DAP variability was found. It is indicated, that SAP variability in childhood is a predictor of arterial hypertension development in adulthood. It is shown, that VAP growth can be a predictor of both first and secondary stroke. There are also the data about independent prognostic value of 24-hour variability of arterial pressure as to cardio-vascular events. The duration of study of 24-hour variability of arterial pressure and the number of publications on this question is underlined and insufficiency of information about long-term variability of arterial pressure is noted. It is accented, that in modern assessment of clinical importance of different parameters of arterial pressure variability the change of priority from 2-hour to long-term monitoring of arterial pressure "from visit to visit" is observed.
- The urgent need in elaboration of accessible methods of assessment of long-term variability of arterial pressure (VAP) that would supply the doctors-practitioners with additional information as to the stroke risk and possible consequences is felt.*
- Conclusions.** Long-term variability of arterial pressure can be considered as a predictor of stroke development and as independent factor of influence on consequences of undergone brain stroke. It is shown, that the problem of arterial pressure variability is polyhedral and needs further deep study
- Keywords:** variability of arterial pressure, day VAP, long-term VAP, stroke, predictor

References

1. Netyazhenko, V. Z. (2015). *Zakhvoryuvanist' ta smertnist' vid khvorob sertsevo-sudynnoyi systemy v Ukrayini. Vprovalzhennya v klinichnu praktyku unifikovanykh klinichnykh protokoliv ta adaptovanykh klinichnykh nastanov po diahnostytzi ta likuvannyu vnutrishnikh khvorob.* Kyiv. Available at: www.guoz.lviv.ua/files/netyazenko.ppt
2. Mishchenko, T. (2015). Akademiya insul'tu: standartyzatsiya ta perspektivy nadannya medychnoyi dopomohy. Ukrains'kyy medychnyy chasopys, 6 (110). Available at: <http://www.umj.com.ua/article/91303/akademiya-insultu-standartizaciya-ta-perspektivi-nadannya-medichnoi-dopomogi>
3. Sirenko, Yu. M. (2004). Medykamentzna profilaktyka insul'tu u khvorykh na arterial'nu hipertenziyu. Liky Ukrayiny, 12, 7–12.
4. Vemmos, K. N., Tsivgoulis, G., Spengos, K., Zakkopoulos, N., Synetos, A., Manios, E. et. al. (2004). U-shaped relationship between mortality and admission blood pressure in patients with acute stroke. *Journal of Internal Medicine*, 255 (2), 257–265. doi: 10.1046/j.1365-2796.2003.01291.x
5. Robinson, T. G., Potter, J. F., Ford, G. A., Bulpitt, C. J., Chernova, J., Jagger, C. et. al. (2010). Effects of antihypertensive treatment after acute stroke in the Continue Or Stop post-Stroke Antihypertensives Collaborative Study (COS-SACS): a prospective, randomised, open, blinded-endpoint trial. *The Lancet Neurology*, 9 (8), 767–775. doi: 10.1016/s1474-4422(10)70163-0
6. Martin-Schild, S. (2009). Blood pressure in acute stroke: lower it or let the CHHIPS fall where they will. *The Lancet Neurology*, 8 (1), 23–24. doi: 10.1016/s1474-4422(08)70264-3
7. Ravenni, R., Jabre, J. F., Casiglia, E. (2012). Rol' antyhypertenzynoy terapyy v pervychnoy profylaktyke ynsul'ta. Praktychna anhiolohiya, 2-1, 37–40.
8. Azhermacheva, M. N., Alyfyrova, V. M., Shmydt, T. E. (2013). Dostyzenyya v profylaktyke, dyahnostyke y lechenyy ynsul'tov (po materyalam 22-ho konhressa Evropeyskoho nevrolohycheskoho obshchestva 8-11 iyunya 2013 h.). *Nevrolohycheskyy zhurnal*, 18 (6), 49–53.
9. Bokeryya, L. O. (2005). Profylaktyka ynsul'ta pry fybrylyatsyy predserdy. *Annaly arytmolohyy*, 3, 45–54.
10. Kovalenko, V. M., Dzyak, H. V., Korkushko, A. V. et. al. (2011). Diahnostyka ta likuvannya fibrylyatsiyi peredserd. Kyiv, 160.
11. Hryhorova, Y. A., Teslenko, O. A., Hryhorov, S. N. (2015). Kardyohenny ynsul'ty. *Klynyko-patohetencheskye, terapevtycheskye y profylaktycheskye osobennosti. Mezhdunarodnyy nevrolohycheskyy zhurnal*, 1 (71), 132–140.
12. Pashkovs'ka, N. V., Pashkovs'kyy, V. M. (2012). Su-chasni pidkhody do likuvannya ta profilaktyky ishemichnogo insul'tu u khvorykh na tsukrovyy diabet. Praktychna anhiolohiya, 2-1, 41–48.
13. Pashkovs'ka, N. V. (2007). Osoblyvosti klinichnogo perebihu hostrykh porushen' mozkovo-bu krovoobihu u khvorykh na tsukrovyy diabet. *Bukovyns'kyy medychnyy visnyk*, 3, 58–61.
14. Man'kovskyy, B. N. (2011). *Ynsul't y sakharinyy dyabet: vz•hlyad éndokrynoloha.* Zdorov"ya Ukrayiny, 1 (15), 38.
15. Svyrydova, N. K., Lubenets', H. S., Popov, O. V., Pavlyuk, N. P., Ussovych, K. M., Svystun, V. Yu. (2015). Kompleksne likuvannya hostrykh porushen' mozkovo-bu krovoobihu. *Vostochno-evropeyskyy nevrolohycheskyy zhurnal*, 3 (03), 4–27.
16. Moskovko, S. P. (2004). *Vtorynna profilaktyka insul'-tiv: nova stratehiya dlya Ukrayiny. Vidpovidyi, yaki mozhe daty doslidzhennya.* Zdorov"ya Ukrayiny, 88, 59–62.
17. Adams, H. P. (2010). *Vtorynna profilaktyka aterotrombozu u patsiyentiv pislya ishemichnogo insul'tu. Praktychna anhiolohiya*, 8 (37), 8–14.
18. Tsivgoulis, G., Ntaios, G. (2012). Blood pressure variability in subacute ischemic stroke: A neglected potential therapeutic target. *Neurology*, 79 (20), 2014–2015. doi: 10.1212/wnl.0b013e3182749f7e
19. Horbunov, V. M. (2012). Sovremennye predstavlenyya o varyabel'nosty arterial'noho davlenyya. *Ratsyonal'naya farmakoterapyya v kardyolohyy*, 8 (6), 810–818.
20. Chernyaha-Royko, U. P., Sorokivs'kyy, M. S. (2012). Variabel'nist' arterial'noho tysku – stratehichna mishen' kombinovanoyi antyhypertenzynoy terapiyi chy mif eksperimental'nykh doslidzhenn? Zdorov"ya Ukrayiny, 2, 71–72.
21. Korobko, Y. Yu. (2012). Arteryal'naya hypertenzyya y ynsul'ty: vozmozhnosti profylaktyky s pomoshch'yu antyhypertenzynoy terapyy. *Medytsynskye novosty*, 10, 25–28.
22. Ebrahim, S., Taylor, F., Ward, K. et. al. (2011). Multiple risk factor interventions for primary prevention of coronary heart disease (Review). *The Cochrane Collaboration. Hoboken: John Wiley & Sons*, 112–128. doi: 10.1002/14651858.cd001561.pub3
23. Rothwell, P. M., Howard, S. C., Dolan, E., O'Brien, E., Dobson, J. E., Dahlöf, B. et. al. (2010). Prognostic significance of visit-to-visit variability, maximum systolic blood pressure, and episodic hypertension. *The Lancet*, 375 (9718), 895–905. doi: 10.1016/s0140-6736(10)60308-x
24. Mancia, G., Bombelli, M., Facchetti, R., Madotto, F., Corrao, G., Trevano, F. Q. et. al. (2007). Long-Term Prognostic Value of Blood Pressure Variability in the General Population: Results of the Pressioni Arteriose Monitorate e Loro Associazioni Study. *Hypertension*, 49 (6), 1265–1270. doi: 10.1161/hypertensionaha.107.088708
25. Sega, R., Corrao, G., Bombelli, M., Beltrame, L., Facchetti, R., Grassi, G. et. al. (2002). Blood Pressure Variability and Organ Damage in a General Population: Results from the PAMELA Study. *Hypertension*, 39 (2), 710–714. doi: 10.1161/hy0202.104376
26. Rothwell, P. M., Howard, S. C., Dolan, E., O'Brien, E., Dobson, J. E., Dahlöf, B. et. al. (2010). Effects of β blockers and calcium-channel blockers on within-individual variability in blood pressure and risk of stroke. *The Lancet Neurology*, 9 (5), 469–480. doi: 10.1016/s1474-4422(10)70066-1
27. Rothwell, P. M. (2010). Limitations of the usual blood-pressure hypothesis and importance of variability, instability, and episodic hypertension. *The Lancet*, 375 (9718), 938–948. doi: 10.1016/s0140-6736(10)60309-1
28. Kang, J., Ko, Y., Park, J. H., Kim, W.-J., Jang, M. S., Yang, M. H. et. al. (2012). Effect of blood pressure on 3-month functional outcome in the subacute stage of ischemic stroke. *Neurology*, 79 (20), 2018–2024. doi: 10.1212/wnl.0b013e3182749eb8
29. Webb, A. J., Fischer, U., Mehta, Z., Rothwell, P. M. (2010). Effects of antihypertensive-drug class on interindividual variation in blood pressure and risk of stroke: a systematic review and meta-analysis. *The Lancet*, 375 (9718), 906–915. doi: 10.1016/s0140-6736(10)60235-8

DOI: 10.15587/2519-4798.2017.97077

ANALYSIS OF THE PATHOPERSONOLOGICAL STRATIFICATIONS IN PATIENTS WITH SEVERE DIABETES MELLITUS 2 TYPE

p. 44-47

Olga Tkachenko, PhD, Associate Professor, Department of therapy, clinical pharmacology and endocrinology, State Institution “Zaporizhia Medical Academy of Post-Graduate Education Ministry of Health of Ukraine”, Vintera blvd., 20, Zaporizhzhia, Ukraine, 69096

ORCID: <http://orcid.org/0000-0003-1454-4837>

Aim. To study the pathopersonological features of patients with severe DM type 2 for improvement of diagnostics and treatment of patients with DM type 2.

Materials and methods. On the bases of MI “Zaporizhzhya city hospital № 1” and MI “Regional clinical endocrinology dispensary” of Zaporizhzhya region council were examined 174 patients with severe diabetes mellitus type 2, who underwent stationary treatment; average age in group was ($61,8 \pm 0,85$) years old.

Methods of research: anamnestic, clinical-psychopathological, psychodiagnostic.

Results of research. As a result of research, the pathopersonological features of patients with severe diabetes mellitus type 2 were established. There were separated five types of pathopersonological stratifications in patients with severe diabetes mellitus type 2: psycho-organic (deficit and affective-labile variants), astheno-neurotic, psychasthenic-depressive, ergo-hypersthenic and hypochondriac types. The influence of each established type of pathopersonological stratifications in patients with severe diabetes mellitus type 2 on their compliance to the therapy was studied. The dominant types of pathopersonological stratifications in patients with severe diabetes mellitus type 2 were established.

Conclusions. The established types of pathopersonological stratifications in patients with severe diabetes mellitus type 2 can be a base of diabetic pathopersonology that improves the quality of differentiated diagnostics and approaches to the therapy and psychoprophylaxis of DM type 2, including in the context of correction of compliance to the therapy of DM type 2 at the expance of dyscompliant personal features leveling.

Keywords: diabetes mellitus type 2, pathopersonology, psychopathic disorders, compliance

References

1. Brojtigam, V., Kristian, P., Rad, M. (1999). Psichosomaticeskaja medicina. Moscow: GJeOTAR MEDICINA, 376.
2. Jaacks, L. M., Siegel, K. R., Gujral, U. P., Narayan, K. M. V. (2016). Type 2 diabetes: A 21st century epidemic. Best Practice & Research Clinical Endocrinology & Metabolism, 30 (3), 331–343. doi: 10.1016/j.beem.2016.05.003
3. Meetoo, D., McGovern, P., Safadi, R. (2007). An epidemiological overview of diabetes across the world. British Journal of Nursing, 16 (16), 1002–1007. doi: 10.12968/bjon.2007.16.16.27079
4. The Protocol of rendering medical care to patients not complicated by diabetes (2009). Ministry Healthcare of Ukraine, No. 574. Available at: http://www.moz.gov.ua/ua/portal/dn_20090805_574.html
5. Unified clinical protocol of primary, emergency, secondary (specialized) and tertiary (highly specialized) medical care. Diabetes in young people and adults (2014). Ministry Healthcare of Ukraine, No. 1021. Available at: http://mtd.dec.gov.ua/images/dodatki/2014_1021_CD1_dor/2014_1021_nakaz_CD1_dor.pdf
6. Degmecic, D., Bacun, T., Kovac, V., Mioc, J., Horvat, J., Vcev, A. (2014). Depression, anxiety and cognitive dysfunction in patients with type 2 diabetes mellitus – a study of adult patients with type 2 diabetes mellitus in Osijek, Croatia. Collegium Antropologicum, 38 (2), 711–716.
7. Esin, R. G., Hayrullin, I. H., Esin, O. R. (2013). Modern ideas about the mechanisms of cognitive disorders in diabetes mellitus. Medical almanac, 1 (25), 135–138.
8. Harris, M. I., Flegal, K. M., Cowie, C. C., Eberhardt, M. S., Goldstein, D. E., Little, R. R. et. al. (1998). Prevalence of diabetes, impaired fasting glucose, and impaired glucose tolerance in U.S. adults. Diabetes Care, 21 (4), 518–524. doi: 10.2337/diacare.21.4.518
9. Lou, P., Qin, Y., Zhang, P., Chen, P., Zhang, L., Chang, G. et. al. (2015). Association of sleep quality and quality of life in type 2 diabetes mellitus: A cross-sectional study in China. Diabetes Research and Clinical Practice, 107 (1), 69–76. doi: 10.1016/j.diabres.2014.09.060
10. Bezbach, V. N. (2005). Strategiya lecheniya i osobennosti kliniki psihicheskikh rasstroystv i psihosotsialnyih problem u bolnyih saharnym diabetom. Sotsialno psihiatricheskie aspektyi saharnogo diabeta. Mezhdunarodnyiy endokrinologicheskiy zhurnal, 1 (1). Available at: <http://www.mif-ua.com/archive/article/2296>
11. Zelenin, K. A., Kovalev, Yu. V., Trusov, V. V. (2010). Anxiety disorders in patients with 2 type diabetes mellitus. Basic research, 7, 24–31.