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**ASPECTS AND FEATURES OF DISEASES OF CARDIOVASCULAR SYSTEM IN PATIENTS WITH CHRONIC PANCREATITIS**

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**Introduction.** At present the problem of aggregate flow of internal diseases is becoming increasingly important. This is related to the fact that in everyday medical practice, these patients account a substantial majority and in each case require the development of adequate therapy. Among these diseases the first place belongs to diseases of the cardiovascular system, which by their prevalence, disability indices and mortality rates are far ahead from other pathological conditions. At the same time, according to the statistical calculations, diseases of the pancreas such as chronic pancreatitis (CP) have large prevalence. The combination of two groups of diseases identifies certain characteristics of clinical symptoms resulting from crossing of pathogenetic links and therapeutic measures.

**The aim** of this paper was to determine the features of clinical manifestations of hypertension or coronary heart disease in patients with CP.

**Materials and methods.** The study involved 37 patients with CP, including 21 cases with the run against a background of hypertension, and 16 with CHD. The age of patients ranged from 27 to 59 years (in average -  $41,4 \pm 5,7$  years), dominated by women - 37 people (78.4%). Duration of disease on CP was in the range of 4 to 18; the diseases of cardiovascular system had a history of 6 to 17 years. CP preceded most of the aforementioned diseases (27 patients - 73%), in 7 person (18.9%) – hypertension, and in three (8.1%) - CHD. Control group was represented by 19 individuals with CP without the associated cardiac pathologies. All patients were hospitalized and passed inspection protocols under management of these patients. The progress of pain and dyspeptic syndromes was assessed.

**Results.** Thus, the occurrence of pain syndrome in patients with an isolated CP was associated with error in diet or physical activity. The pain was localized in the left abdomen (17) and irradiated to the left scapula, back (14); lasted 3-4 hours and decreased a bit after the prescription of antispasmodic and enzyme medicines. At the same time there were unstable stool with a tendency to retention of feces. At the same time for the 3-4<sup>th</sup> day of stay in the department the pain was significantly reduced. In patients with aggregate hypertension the pain occurrence at the point of projection of pancreas was significantly often (66.7%) accompanied by the increased blood pressure and was accompanied with the prolonged nausea in 13 people (61.9%). In these patients there was no defined irradiation of pain to the left half of the body, its duration depended on the height of arterial tension. In patients with CHD, the pain occurred against the backdrop of cardiodynia, accompanied by tachycardia, and in 9 (56.3%) cases - with the emergence of extrasystole. If patients determined the occurrence of stenocardia at night (7 - 43.8%), the discomfort occurred at the left upper quadrant which did not lead to the full-scale attack of pain; and such clinical manifestations persisted for a long time - 3-4 hours. In the morning these patients showed the defined general weakness, lethargy, malaise. The prescription of antispasmodic drugs for such patients during the acute cardiac pathology almost did not lead to improvements, but the pain disappeared under the influence of pathogenetic therapy of the appropriate nosology form - hypertensive or coronary drugs. Another problem in the indicated patients was the dyspeptic syndrome manifested by prolonged (2-3 months) symptoms.



**Conclusions.** The combined course of CP and hypertension and coronary artery disease or CHD leads to changes in clinical symptoms, signs of cardiac pathology come to the fore, manifestations of disease of the pancreas become smoothed out or gain some atypical course. Emerging pain syndrome in this case is likely to have a reflex nature as a result of the sympathetic nervous system involvement. Another feature of such patients is long dyspeptic syndrome, which persisted for 2-3 months.

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## **INTERACTION OF THE CONDITION OF THE IMMUNE SYSTEM AND WAY OF LIFE OF YOUNG PEOPLE**

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**Introduction.** Health of young people is one of the most urgent problems in Ukraine. According to the domestic and foreign researchers, the number of healthy newborns in the major cities of Ukraine doesn't transcend 1%, more than 60% of young people smoke, and 50% of adolescents are limited in the choice of profession because of the health reasons.

**Aim.** The determination of the level of immunity HNMU students and identify the main factors that affect the immune system.

**Materials and methods.** We have carried out a survey and data processing.

**Results.** The study surveyed 35 students at the age of 18-21 years: The dependence of the immune status (IS) was analyzed according to the three groups of factors: psychogenic, bad habits and frequency of recurrences of herpes. We have found out a clear correlation between the state of IP and psychological status. So, 66% of students with low levels of immunity observed fatigue, 85% is a constant stress, 55% are not able to relax and feel insecure in the classroom. Our results are consistent with the modern concept (about 80% of all diseases are linked in one way or another, with psychogenic effects.) A similar dependence has been established in respect of bad habits. 69% of students with low immunity are heavy smokers, 48% of the students frequently use alcoholic beverages, which is four and a half times more than in the groups with good immune status and the average (24% and 12%, respectively). In addition, students with low immune status more likely to suffer recurrences of herpes.

**Conclusions.** The results of this study may be an indirect indicator of the immune system of the respondents. There is a clear dependence of the immune system to the presence of the respondents bad habits. This, in turn, proves that the state of the immune system can and should be influenced by the formation of a healthy lifestyle.

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**CORRELATION OF SCD40L LEVEL AND THE LEVEL OF INSULIN IN**  
**PATIENTS WITH ACUTE MYOCARDIAL INFARCTION AND DIABETES**  
**MELLITUS TYPE 2**

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**Introduction.** sCD40L is a new independent marker of autoimmune inflammatory reaction in the vessels.