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of fatty acids in the oxidation. A child over 5 months was constantly under the supervision of doctors, but the layering of viral disease has resulted in metabolic catastrophe in the form of oppression of the central nervous system, myoclonic seizures, which were continuous in nature, not amenable to medical correction and the emergence of progressive liver dysfunction in the form of cytolysis (exceeding 10 standards) hyperbilirubinemia due to direct fraction and hypoproteinemia (viral hepatitis are excluded), which was seen as the development of complications such as Reye's syndrome. Against the background of the child's condition deteriorated therapy, complicated multiple organ dysfunction syndrome (cerebral, respiratory), and despite

resuscitation, biological death was pronounced. At the postmortem examination of biopsy specimens: liver - liver diskompleksatsiya beam structure, hepatocytes are able to large-drop adipose degeneration with a break tsitolemy and cytolysis. Kidneys - in terms of epithelial tubules fat distofiya - intracellularly within the cytoplasm of fat vacuoles. The brain - phenomena expressed perivascular, peritselyullyarnogo and perinuclear edema.

**Conclusion:** the clinical feature of this case lies in the combination of subcortical and cerebellar degeneration on the background of metabolic disorders of fatty acids with the further development of Reye-like syndrome.

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### **THE RISK FACTORS OF THE DEVELOPMENT OF CARDIOVASCULAR DISORDERS IN CHILDREN WITH GASTROENTEROLOGICAL DISEASES**

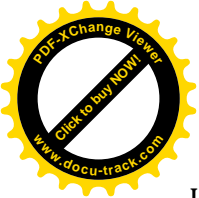
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**Actuality.** Recently rapid development of preventive medicine based on preventive and corrective measures. Risk factors for cardiovascular diseases are divided into modified (smoking, obesity, dietary factors, low physical activity) and the non-modified (individual medical and family histories).

**The aim** of the article is to examine stratification of the risk factors for cardiovascular diseases in children with diseases of the digestive system.

**Materials and methods:** the survey respondents were 66 children aged from 2 to 17 years, girls - 32 (48.5%) and boys - 34 (51.5%) with



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digestive diseases. The analyzed anthropometric data; generally recognized clinical laboratory and instrumental diagnostics, the "Genetic questionnaire" were used to verify the children's diagnoses.

**Results:** the anthropometric data analysis of the examined group of children showed that 42.4% of patients had normal level of BMI, 30,2% of patients had the increased level of BMI and 24,0% of patients had low level of BMI. The analysis showed that the normal blood pressure had 69.7% children prehypertension had 10.6% children and the stage 1 hypertension had 9 (13.6%) children. Muffled heart sounds was observed in 22.7% patients, functional systolic murmur in 37.8%, ECG changes in 68, 2%, monotop heart rhythm disturbances in 50%. According to the data ECHO r mild dilatation of the left ventricle was registered in 30.3% patients. The results obtained by the "Genetic questionnaire" was revealed: blonde hair in 54.5% of children, 68,5% of parents, blue eyes - 28.8% of children, 30.3% of



parents, pale skin - 19.7% of children, 24.2% of parents, vascular pattern on the skin - 13.6% of children, 10,6% of parents. Cardiovascular diseases had 28.0% of parents. Overweighed or obese were 22.7% of parents. Furthermore, 36.4% of the surveyed children led a sedentary lifestyle. Posture abnormalities had 45.5% of children and 6.9% of parents, propensity to fracture of bones - 15.2% of the surveyed children and 3,1% of parents.

**Conclusion:** the important factor of the development of cardiovascular disorders in children with chronic diseases of the digestive system can be genetic defects of folate cycle enzymes and the risk factors: early cardiovascular diseases in family anamnesis, smoking, overweight or obese. Stratification of the risk determines the probability of development of cardiovascular diseases; affects treatment strategy, allows to assess the individual prognosis and to identify groups for social and medical support.

