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**Tsopozidis Christos, Borisenko Anastasia, Telezhnyi Andrii**

**CLINICAL CASE: SOMATOPSYCHIC DISORDER IN A FEMALE PATIENT WITH  
MULTINODULAR EUTHYROID GOITER**

**Kharkiv National Medical University**

**Department of Surgery No. 1**

**Kharkiv, Ukraine**

**Actuality.** Psychogenic disorders referred to as nosogenies due to the influence of psychotraumatic events associated with somatic disorder. In case of combined impact of a number of adverse factors, the reaction to the disease can become so extreme that its management in the early stages of therapy seems no less important than the direct treatment of somatic condition.

**Materials and methods.** We present a clinical case of somatopsychic disorder in a female patient with Multinodular goiter, grade 2, euthyrosis.

Complains: enlargement of the thyroid gland, tickling, sensation of a lump in the throat, choking in horizontal position, general weakness, chills, dizziness, fear for her life associated with the presence of oncological disease.

On physical examination the thyroid gland is visually identified. On palpation it is of dense elastic consistency, nodular, partly located behind the breastbone, nodal masses in both lobes of up to 4-5 cm in diameter, dense consistency, mobile, painless, no adhesion to the skin.

Thyroid hormone levels: TSH 2.4 mIU/L, total T4 102 nmol/L, total

T3 2.2 nmol/L, free T4 16 pmol/L, free T3 8,4 pmol/L, TPOAb 70 mU/l.

**Thyroid gland ultrasonography:** In the structure of the gland the similar type of isoechogenous masses of heterogeneous cystic-solid structure with clear boundaries: 14×10×12 mm in the middle segment of the right lobe, 35×26×37 mm in the lower segment of the right lobe, and 43×32×35 mm in the lower segment of the left lobe.

Fine-needle aspiration biopsy of the thyroid gland №0402/825. Microscopically: in the midst of the peripheral blood cells and basophilic colloid there are unchanged A-cells in the form of singular layers, and B-cells. No atypical cells were found.

Subtotal resection of the thyroid gland was performed.

Histological conclusion: the nodular micro-macrofollicular colloid goiter with secondary changes, microfocal chronic lymphomatoid thyroiditis.

**Results.** 2 weeks after receipt of the histological conclusion the patient began to hold demands against medical staff about the unreasonable surgery, which caused, in her words, her disability, inability to perform daily activity at home and





at work. The patient again began complaining to tickle, feeling of a lump in her throat, choking in horizontal position, general weakness, tremor, excessive sweating, hot flushes, chills, dizziness. The patient undeniably refused to re-consultation.

**Conclusion.** The above example demonstrates the difficulty

in selecting the tactics of management for such patients due to development of symptoms primarily determined by psycho-emotional tension. This category of patients should be followed not only by endocrinologists, surgeons, but the multidisciplinary team, including psychiatrists, and psychotherapists.

**Volik M.**

## **THE STIMULATION OF PROSTAGLANDINS IN THE TREATMENT OF ERECTILE DYSFUNCTION**

**Research advisor: Knigavko A., MD, PhD., Professor  
Kharkiv National Medical University,**

**Department of Urology, Nephrology and Andrology, Kharkiv, Ukraine**

**Actuality.** The incidence of erectile dysfunction (ED) is 26.2%. Today a man suffering from ED wants to have a full erection at any age and at any time, and also have the ability to control its duration.

**The aim.** To evaluate the clinical efficacy and safety of intracavernosal injection therapy with prostaglandin E in comparison with other conservative treatment methods.

**Materials and methods.** We were observing 67 patients with impaired erectile function during 12 months. The mean age of patients was  $56.1 \pm 12.3$  years. The mean duration of ED was  $3.2 \pm 2.1$  years. The evaluation criterion was ED the International Index of Erectile Function (IIEF), calculated using questionnaire. All patients were

divided into 3 groups. Group 1 (n=19) used the endocavernosus injections of Alprostadil in a dosage of 10 micrograms combined with 1 ml. papaverine. Group 2 (n=20) applied Tadalafil 10 mg (the group of inhibitors of phosphodiesterase type 5 (PDE5) daily. The 3rd group was prescribed Tadalafil 10mg daily in combination with rectal administration of the drug Vitaprost-Forte which stimulates the production of own prostaglandins.

**Results.** It was found that among the patients of the 1st group successfully carried out sexual intercourse was registered in 94%, in comparison with the 2nd and the 3rd group, which had number of sexual acts 78.4% and 92.3%, respectively. The erection was achieved most quickly in patients of