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## **DEGREE OF PROBABILITY THE EXPERT'S CONCLUSIONS IN CASES OF FORENSIC-MEDICAL EXAMINATIONS OF CORPSES PERSONS WHICH DIED FROM OVERCOOLING ORGANISM**

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**Introduction.** Diagnosis of the causes of death in hypothermia is one of the most pressing problems of forensic science and practice, as well as medicine and biology in general. Death from low temperatures in forensic medicine accounts for 2.6% of all cases of violent death, mainly among males of working age, which is sufficient reason for considering this type of death as an obvious social problem. The purpose of the study was to improve the diagnosis of the causes of death in case of the organism's overcooling by a mathematical justification of the reliability of the expert's conclusions about the cause of death. Tasks: Estimation of the frequency of detected external and internal signs of death from hypothermia; the establishment of the probability coefficient of each of the characteristics.

**Materials and methods.** In the period from 2016 to 2017, 155 corpses of male and female persons were examined. The statistical method was used for the study - all the information received was recorded in the registration cards and a mathematical method using the Bayesian postulate. The survey data of forensic experts on the death from hypothermia, which were encountered in the practice of the Kharkov forensic medical examination, showed the following: Analysis of the cases of lethal hypothermia among men and women showed some unevenness, since a significant majority of deaths occur in males aged 20-50 years (more than 80 % of observations).

**Results.** Estimation of the frequency of occurrence of diagnostic signs of death from hypothermia showed that the most common signs are the spots of Vishnevsky (100%), Fabrikantov stains (93%), edema of the brain and soft meninges (91%), carmine red and or light red (79%), red color of cadaveric spots in frozen (67%), sign of Puparev (38%), convolution of blood in the cavities of the heart and aorta (27%), lungs in the incision (90%), dilated pupils with alcohol intoxication (79%).

**Conclusion.** 1. Forensic diagnosis of the causes of death from hypothermia can be performed using the proposed diagnostic method, the essence of which lies in the mathematical calculation of the summation of diagnostic macro- and microscopic features.

2. To establish the conclusions about the reliability of the causes of death from hypothermia, the expert must, using the proposed table, summarize the reliability coefficients of the diagnostic features.



3. Using the proposed method to determine the reliability of the expert's conclusions will provide an opportunity to increase the objectivity and accuracy of forensic diagnostics of death from hypothermia.

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## **THE SEVERITY OF FATIGUE SYNDROME IN CANCER PATIENTS AFTER COMBINED ANTITUMOR TREATMENT**

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**Introduction.** Oncological diseases constitute a significant medical, psychological and psychosocial problem. Progress, which occurred in the diagnosis and treatment of malignant neoplasms, increased the overall survival of cancer patients. However, a high level of psychological stress, a pessimistic perception of the prospects for treatment provoke the development of fatigue syndrome, which adversely affects the health status and treatment of patients. In this regard, the identification of the development of this syndrome and the timely conduct of therapeutic and preventive measures to prevent its development is an actual direction of modern medicine.

The aim of the work is to evaluate the severity of fatigue syndrome in patients with uterine body cancer (UBC) before and after combined antitumor therapy.

**Materials and methods.** Clinical and laboratory studies were conducted in 46 patients with the diagnosis of adenocarcinoma UBC before and after the combined treatment (panhystectomy, radiation therapy). A study of hematological parameters was performed using the hematological analyzer SF-3000 (SYSMEX, Japan). The study of the concentration of cortisol in the blood serum was performed by an enzyme immunoassay using the Steroid-IFA-Cortisol-01 reagent kit (Alkor Bio, Russia). Evaluation of the degree of psychosomatic abnormalities in UBC patients was carried out with the help of a questionnaire (EORTC QLQ-C30 test) (Fayers P.M., 2001).

**Results.** Results of the study of hematological parameters of patients before and after the treatment showed a decrease in the number of lymphocytes, erythrocytes and hemoglobin level, which indicates the development of anemia against the background of lymphopenia. In the study of the psychosomatic state of women before and after treatment, signs of increased fatigue and sleep disturbances were revealed. A significant increase in the level of cortisol in the blood serum before and after treatment was established, which can lead to weakness, sleep disorders and depression.

**Conclusion.** Thus, for a more complete and qualitative treatment of patients, it is necessary to take into account in the general therapy complex its influence on their psychosomatic state, which will