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**CARBOHYDRATE EXCHANGE CHANGES AT THE DIFFERENT TYPES**

**OF ANTIHYPERTENSIVE THERAPY IN PATIENTS WITH**

**HYPERTENSION AND OBESITY**

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**Introduction.** Growing prevalence of the combined course of hypertension and obesity which lead

to a summation of cardiovascular risk, causes search of new therapeutic strategies. There are

differences between antihypertenzive drugs both in one class, and between different classes, which

concern all range the pharmacodynamic of effects.

**Aim.** To carry out the comparative analysis carbohydrate exchange changes at different

antihypertenzive therapy types in patients with hypertension and obesity on the basis of a

carbohydrate exchange indicators dynamics research.

**Materials and methods.** 70 patients with hypertension and obesity participated in a research. On the

І stage of research- all patient with hypertension and obesity were given ramipril in a daily dose 5

mg. In two weeks control of AP was carried out: 26 patients (37,14%) have reached the target AP

levels. The ІІ stage: in patients without clinical effect the ramipril dose was increased to 10 mg, 8

patients more achieved the target AP levels (11,43%). The III stage: two subgroups were created: the

first group (n=20), where patients received 10 mg ramipril and 5 mg amlodipin; the 2-nd group

(n=16), where lercanidipin was appointed daily dose 5 mg. The IV stage; in three months

carbohydrate and adipokine exchange parameters were estimated. Level of blood insulin was

estimated by the method of the imunofermentative analysis, glucose level - by a glucose oxidase

method.

**Results.** Reliable differences concerning glucose levels dynamics on an empty stomach wasn’t

established in both groups (р >0,05). In patients of the 1-st group in 3 months insulin decreased on

26,69, index of NOME - on 24,42 (р<0,05). While by treatment with ramipril and lerkanidipin

decrease of insulin on 44,26, index of NOME on 45,59 was noted (р<0,05). Lack of changes

concerning glucose level on an empty stomach and obesity depending on treatment schemes was

showed (р>0,05). At the 2-nd group patients the level of insulin was decreased on 17,57 more than

129

in the 1-st group, the index of NOME - on 21,17 (р<0,05). The efficiency of use of both treatment

schemes in such the patients due to positive influence on carbohydrate exchange indicators was

proved. Advantage should be provided to application of a ramipril and lerkanidipin.

**Conclusion.** In treatment in patients with hypertension and obesity, in case of inefficiency of

monotherapy by ACEI, advantage should be provided to purpose of a ACEI and calcium antagonists

combination. Purpose of the ramipril and lercanidipine is more expedient due to the best influence on

an indicators of adipokine exchange condition.