the patient. The patient may notice a decrease in tear production. The oral complaints like dryness, difficulties in swallowing, throat tightness, choking, cracking of lips and inner oral cavity and bleeding. The patient may notice salivary parotid gland enlargement. 2nd group: These symptoms may not be as dominant as the 1st group but they are more or less a hindrance and annoyance to the patients and they may include dryness of the skin up to causing cracks and bleeding accompanied by burn sensation, dry and easily cracked hair. Joints pain with burn sensation and even lumps in joints are complained. Fatigue and weight lose and disturbance of sleep. The patient (female) may complain of dryness of the vagina. 3rd group: This last category may not be present in most cases but they are rather difficult to be dealt with by the patients and doctors as they are normally not easily linked to the syndrome and they may include sinusitis, blockage of nasal passage and COPD. For confirmation of the diagnosis, the doctor should investigate the function of the lacrymal gland with Schirmer's test, the function of salivary glands with sialography, pathohistologic changes in salivary glands by biopsy, and serological tests for antibodies against Ro/SS-A or LA/SS-B.

**Conclusions.** Sjögren syndrome is characterized by slowly progressing symptoms, which make them differ in characteristics and severity. The doctor may not be able to confirm or misdiagnose. There is no cure, but symptomatic treatment with artificial tears and saliva and different lubricants is useful.

**Andreeva A.**

**THE ADIPOCITOKIN VISFATIN: INSULIN SENSITIVITY, INFLAMMATION REGULATOR IN PATIENTS WITH HYPERTENSION AND OBESITY**

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**Introduction.** Adipokines play a significant role in the pathogenesis of a low-grade inflammation associated with obesity, metabolic syndrome and in chronic inflammatory. Visfatin is a novel adipocytokine identified in 2005. On the other hand, visfatin has been suggested to be a beneficial adipokine with insulin-mimicking-sensitizing effects, but regulation of visfatin production and its physiological importance in the conditions of obesity and type 2 diabetes mellitus (T2DM) are still not completely understood.

**The aim** of this abstract was making general survey of the literature and research from 2005 to 2012 years.

**Materials and methods.** ItÔÔ known that metabolic syndrome consists of visceral obesity, hypertension and atherogenic dyslipidemia. Newly identified adipokines - visfatin (also known as pre - cell specialist Ôfactor) - is synthesized in humans mainly in visceral adipose tissue and its plasma concentration increases with the development of obesity. there are conflicting results concerning the expression and role of circulating levels of visfatin in diseases associated with metabolic syndrome. There are contradictory data on visfatine and its relationship with other markers.
T2DM and hypertension. Chen et al. showed that the concentration of visfatin increased 2-fold and that the adipokines associated with T2DM. Other authors found no relationship between plasma visfatin and sensitivity to insulin or insulin itself. As described earlier, the dual effect of visfatin, namely the total insulin-like and local adipogenic effects, creates a therapeutic response using visfatin or its analogues in clinical practice to treat T2DM. On the one hand, they can facilitate the control of glucose, on the other hand, may enhance the development of obesity.

Conclusions. So visfatin is a promising new factor in adipose tissue, but the challenge remains to establish its clinical role.

Alpha Bah

DIAGNOSIS FEATURES OF PULMONARY DISTOMATOSE

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Introduction. After sampling and practicing parasitological test of patients’ spittle received for checking at the Prefecture of Maférinyah’s Health Centre, it was found at five cases with eggs of Paragonimus Sp.

Material and methods. An immunological analysis of the serums for these 5 cases of affected patients led to the Medical college of Rennes (France). The electro syneresis test did not give a positive test in all the 5 studied cases. On the other hand the immunoelectrophoresis and the ELISA appeared positive in the 5 cases in a complementary way confirming thus the results of the parasitological tests. The patients were treated with the Praziquantel.

Conclusion. An investigation into the intermediate hosts shows that the area of the Prefecture Maférinyah is rich in crabs, shrimps and crayfish; potentials intermediate hosts of Paragonimus and usually entering in the food of the local population.

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THE RELATIONSHIP OF LEPTÍN, RESÍSTÍN AND ADÍPONECTÍN İN THE PATİENTS WİTH METABOLİC SYNDROME

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Introduction. The relationship of leptin, adiponectin and resistin with macrovascular complications (MVCs) is not evident in patients with metabolic syndrome (MS) and type 2 diabetes mellitus.

Aim. To determine adiponectin, leptin and resistin levels in MS patients and their association with carotid intima media thickness (CIMT) an early marker of atherosclerosis and MCVs.

Materials and methods: 72 patients with MS, aged 50±8 yrs, F/M:28/44 were included, duration of diabetes 9 ±6.8 years, none had MVCs. 18 healthy subjects, aged 36±7.5 yrs, F/M:10/20, formed control group. Systolic and diastolic blood pressure, body mass index, carbohydrate and lipid metabolism indexes were measured. Adiponectin, leptin and resistin levels were determined by enzyme-linked immunosorbertent assay. CIMT was measured by Doppler ultrasonography.