(decrease in erectile dysfunction). Side effects such as Insomnia and Mood changes were also reported by 4,5 % of the participants.

Conclusion: Panax Ginseng showed some effective improvement of lipid profile and erectile dysfunction in majority of the participants. Insomnia and Mood changes were reported by a minority of patients, although it wasn't significant. The wide availability of Panax Ginseng in Nigeria and its proven effectiveness in a short time frame makes it a suitable alternative or adjunct to routine pharmacotherapy in treating dyslipidemia and male sexual weakness in diabetic patients.

Parkhomenko K.Yu., Zazdravnov A.A. FEATURES OF FORMATION OF POSTOPERATIVE VENTRAL HERNIAS IN YOUNGER PATIENTS WITH A SYNDROME OF AN UNDIFFERENTIATED CONNECTIVE TISSUE DYSPLASIA

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Introduction. Surgical unurgent pathology is a consequence of chronic pathology of internal organs as a rule. This situation can be defined as comorbidity. The presence of comorbidity can significantly affect the course of the postoperative period and the prognosis of the surgical disease. The combination of a syndrome of an undifferentiated connective tissue dysplasia (UCTD) and postoperative ventral hernia (PVH) is a very common variant of surgical-therapeutic comorbidity.

The aim is to determine the effect of UCTD on the occurrence of PVH in young patients.

Methods. 29 patients (19 women and 10 men) with PVH were examined. The age of the patients was 29 ± 2.11 years. Common clinical and anthropometric methods were used. Non-parametric χ^2 test was used for statistical processing of the results.

Discussion. Anamnesis of the examined patients included various surgical operations: 14 patients - previous hernia repair, 5 patients - appendectomy, 4 patients - operations for injuries of the abdomen, 3 patients - cholecystectomy, 3 patients - other operations. 18 (62,1%) patients had small PVH that did not change the abdominal configuration. The remaining 11 (37.9%) patients had moderate PVH, which occupied a separate part of any area of the ventral abdominal wall.

Standard signs of UCTD (Walker-Murdoch test, hypermobility of the elbow joints, flatfoots, scoliosis, varus or valgus deformity etc.) were detected in 23 (79,3%) patients. Among patients with PVH and UCTD, 13 patients had small PVH, and 10 patients had moderate PVH. Among patients with PVH

without UCTD, only small PVH were observed (6 patients). The revealed changes were statistically significant (p = 0.046, χ^2 = 3.982, df = 1).

Conclusion. The presence of UCTD is the background to the formation of PVH in young patients. Small-sized PVHs are observed both in comorbid pathology (PVH and UCTD) and in the isolated course of PVH. However, the formation of hernias of moderate size is observed in patients with combined pathology (PVH and UCTD). Thus, a congenital defect in the structure of the connective tissue due to UCTD contributes to the development of PVH and the formation of larger hernias. Hernioplasty of the anterior abdominal wall with a mesh implant is the optimal method of surgical treatment of ventral hernias, which allows stopping the degenerative processes at the site of the hernia on the background of weak connective tissue.

Sumanth P.¹, Maruthi Prasanna K.V.², Shapkin V.E.² STUDY THE EFFECTIVENESS OF THE USE OF HERB ASHAWAGANDHA (WITHANIA SOMNIFER) IN PATIENTS WITH HASHIMOTO THYROIDITIS AND COEXISTING CHRONIC NONSPECIFIC ARTHRITIS

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Hashimoto thyroiditis (HsT) is an autoimmune disease that affects the thyroid gland with the development of hypothyroidism at later stages. Actually HsT is one of the most common cause of hypothyroidism.

Therefore, the HsT as part of comorbid pathology is of current interest.

Methods. In total of 72 patients selected. Age varied from 32 to 60 years. Selected patients included both female and male with Hashimoto Thyroiditis (mild form) and coexisting chronic nonspecific arthritis. The patients were divided into two groups, first group of 51 patients receive the Ashawagandha (Withania somnifera) with standard medications and second group of 21 patients receive only standard medications, which include Diclofenac sodium and L-thyroxine (12.5-25 mcg per day).

We used powdered roots of Ashwagandha with honey and ghee (clarified butter).

Results and discussion. Our study showed a positive effect of Ashwaghandha. In both groups results compared show that in 68% patients use Ashwaghandha the general well-being and blood pressure restored to normal faster. Combination of Withania somnifera along with Diclofenac sodium demonstrated satisfactory results in the treatment of arthritis. Arthritis associated pain has been decreased in 98% of cases. Thus, the mobility of the joints has increased too. But Ashwaghandha use has accelerated this process for a few