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GENDER ANALYSIS OF THE CARIES INTENSITY IN PERSONS WHICH ARE WORKING UNDER THE INFLUENCE OF LOW-FREQUENCY ELECTROMAGNETIC RADIATION

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The dentists have noted various manifestations of the negative effects of electromagnetic fields on the organs and tissues of the oral cavity in recent years. Development of dental disease is characterized by a violation of mineral metabolism in the hard tissues of the teeth, hyperesthesia, the formation of wedge-shaped defects, enamel erosion, the appearance of local demineralization, pathologic process in the mucous membrane of the mouth, gingivitis, hyposalivation. The rapid development of scientific and technical progress, as well as the appearance of various electromagnetic radiations makes the human body is in a certain environment, which, unfortunately, has a negative impact on the state of its systems and organs.

Materials and methods. Investigations was carried out among the workers of the press-welding workshop of the Kharkov tractor plant. Among the surveyed 38.5% were women, 61.5% men. The monitoring of dental morbidity and the study of basic indices which characterize the condition of hard dental tissues, testifies about high incidence of main dental diseases.

Results. The gender analysis of the caries intensity of teeth revealed that the index DMF (decayed, missing and filled teeth) in women is to higher at the expense of extracted teeth and teeth with artificial crowns. The average index of women was 15.2%. Among them 19.1% were extracted teeth, 47.0% - filled, 27.1% teeth with artificial crowns and 6.8% carious teeth.

The average value of the DMF index for men was 13.8%. Among them 31.8% were extracted teeth, 38.0% - filled, 17.4% teeth with artificial crowns and 12.8% carious teeth.

Gender analysis has shown that patients of different sex significantly differ in frequency and type of lesions caries of teeth. Among male patients, pulpitis is more frequency. At the time of examination, 51.9% of male patients had symptoms of pulpitis. The percent of uncomplicated caries at the time of treatment accounted for 39.0%, periodontitis - 9.1%. In women, the distribution of pathology was as follows: 62,1% - uncomplicated caries, pulpitis - 29,6% and periodontitis - 8,3%.

Similarly, non-cariogenic lesions of hard dental tissues such as pathological erosion, wedge-shaped defects, and enamel hypoplasia have been identified.

Pathological severity in the study group of men was 47.8%, in women 43.8%, which is much higher than the control group 17.6%.

Clinical defects were diagnosed in 27.3% of men and 24.4% of women in the main groups, in the control group, this figure was 8.5%.

Hypoplasia of enamel was observed in 12.4% of men and 7.8% of women, in the control group 4.2%.

Gender analysis revealed that in men, the ratio of maintenance of teeth and their extracted corresponds to 1/5, which is lower than that of women 1/3. The obtained data suggest the necessity of organization of active dental care. During the planning and implementation of planned sanitation and medical examination, age and gender factors that determine the high morbidity rate of cariogenic pathology of employees should be taken into account.

HEMORRHAGIC AND THROMBOEMBOLIC COMPLICATIONS IN PATIENTS WITH IMPLANTED LEFT VENTRICULAR ASSIST DEVICES IN EARLY POSTOPERATIVE PERIOD

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Abstract. The work is devoted to study hemorrhagic and thromboembolic complications in early postoperative period after implantation of left ventricular assist devices (LVAD).

We performed retrospective analysis of 10 patients, males aged 55±13.5 years, with a BMI of 30.8±8.3, with a left ventricular ejection fraction ranging from 9% to 28%, which in the period from 11.03.2016 to 22.11.2017 year, in the Silesian center of the Heart Disease (Poland), in conditions of artificial blood circulation, LVAD was implanted.

In the early postoperative period, patients received daily anticoagulant target therapy (ACCT), consisting of the following drugs: heparin (6-11 U/kg/h), aspirin (75-150 mg), Clopidogrel (75-150 mg), warfarin (1.5-7 mg), Nadroparinum Ca (0.3-0.6 ml/twice on day), Fondaparinux Na (2.5-5 mg/twice on day). Two patients received mono-heparin therapy, one patient received monotherapy with warfarin for 14 days. Other patients during the same period received combined heparin therapy in the first three days with a subsequent transition to warfarin, aspirin, Clopidogrel, Fraxiparin, or thrombin blocker.

The mechanical support of the left ventricle was carried out essentially by two different implantable systems, performing one function of support of the left ventricle: POLVAD - programmed controlled pneumatic membrane mechanical circulation of blood to two patients, and LVAD program-controlled electro-centrifugal circulation for eight patients. The duration of support by POLVAD system was from 102 to 156 days. Length of support - LVAD ranged from 20 to 78 days.

A comparison of the analyzed results led to the conclusion that anticoagulant mono-therapy with heparin or warfarin leads to an increase in the percentage of complications and mortality compared with the alternative combination anticoagulant targeted therapy consisting of the following drugs: heparin (6-11 U/kg/h), aspirin 75-150 mg), Clopidogrel (75-150 mg), warfarin (1.5-7 mg), Nadroparinum Ca (0.3-0.6 ml/ twice on day), Fondaparinux Na (2.5- 5 mg/ twice on day), Where survival rates were significantly higher by 60%.

Key words: left ventricular assist device (LVAD), anticoagulant targeted therapy (ACTT), hemorrhagic and thromboembolic complications.

Conflict of Interest: The authors do not foresee conflicts of interest.