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SF-36 AS AN INDICATOR OF THE PATIENT'S GENERAL CONDITION IN ACUTE MYOCARDIAL INFARCTION WITH CONCOMITANT OBESITY

Introduction. At the present stage of the development of medicine, the assessment of life quality (LQ) becomes important not only as an indicator of the patient's general condition, the effectiveness of pharmacotherapy and the rehabilitation measures being carried out, but is also used as a prognostic criterion for recovery. Special attention should be paid to the issues of physical and emotional well-being of patients with coronary heart disease and, in particular, acute myocardial infarction (AMI) at the background of metabolic disorders.

The aim of the study. To analyze the patients' quality of life with acute myocardial infarction, depending on the presence or absence of concomitant obesity using the SF-36 questionnaire.

Materials and methods. 60 patients with AMI were examined during the study. The first group consisted of 35 patients with concomitant obesity, the second - 24 patients with normal body weight. Patients of both groups were comparable in age. The LQ was assessed using the non-specific SF-36 Health Status Survey questionnaire. Statistical processing of the data was carried out using the statistical software package Statistica 8.0, Microsoft Office Excel.

Results and discussion. Analysis of the obtained data showed the reliable differences in the form of the significant reduction in the number of points in the role-physical functioning (RP) parameters of by 75.3%, vital activity (VT) - by 48.3% and role-emotional functioning (RE) - by 64.1% in patients with AMI in the presence of concomitant obesity compared with non-obese patients. These results are supported by inverse correlation relationships between the patient's body mass index and the indicated above parameters of LQ ($p < 0.05$).

Conclusion. The presence of obesity is associated with a notable decrease in the quality of life in patients with acute myocardial infarction compared with patients who have

normal body weight due to the physical and psycho-emotional components of health, which indicates a significant limitation of the patient's daily activities.

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ROSUVASTATIN EFFICIENCY IN PATIENTS WITH METABOLIC SYNDROME

The prevalence of metabolic syndrome (MS) among the population, an average of 20-25%, makes the search for approaches to its treatment extremely relevant. One of the directions of treatment for patients with MS is the correction of lipid disorders. First-line drugs for normalizing lipid levels are currently statins, which have been shown to be effective in reducing cardiovascular mortality in a number of studies (GALAXY, JUPITER, STELLAR). Researchers' attention to rosuvastatin is attracted by its much more pronounced effect on the degree of lowering of low density lipoprotein cholesterol (LDL cholesterol), as well as its ability to increase the level of high density lipoprotein (HDL cholesterol) in the blood, which was confirmed in the ECEP ATP III study.

The goal is to study the effect of rosuvastatin on the state of lipid metabolism in patients with MS. We have analyzed the case histories of 48 patients aged 48 to 72 years with stage II hypertension and dyslipidemia, who were outpatiently treated in the clinical hospital "Clinical Hospital № 27". In the treatment regimen of patients, along with antihypertensive drugs, rosuvastatin in a daily dose of 5 mg was included. The follow-up was 3 months. The determination of total cholesterol (OX), triglycerides (TG), low density lipoproteins (LDL) and high density lipoproteins (HDL) was carried out by the biochemical method, and the atherogenic coefficient (CA) was calculated.

In the study of lipid levels before treatment, all showed an increase in OH by 17.6%, TG by 12.2%, LDL cholesterol by 19.2% of normal, HDL cholesterol was reduced by 24.8%, CA was $6,4 \pm 1,6$, which indicates significant violations of the lipid spectrum of the blood of patients. After 2 months from the start of rosuvastatin use, the level of OH decreased by 19.2%, TG by 7.6%, LDL cholesterol by 29.8%, and HDL cholesterol