method in patients with obesity, osteoarthritis and bronchitis. Ongoing research is still on to find if there is any adverse effect of garcinia kola.

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METHOD OF TREATMENT OF CHRONIC ACALCULOUS CHOLECYSTITIS WITH HYPERKINETIC TYPE OF GALLBLADDER DISKINESIS IN COMBINATION WITH HYPERTENSION

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Epidemiological studies show that the course of diseases of internal organs is not unique. There is a comorbidity of diseases, each of them might affect the course of the others and that is most often observed. Practical medicine must work out appropriate treatment methods which are able to influence the pathogenetic mechanisms in various comorbid pathologies.

Diseases of the gastrointestinal tract are very common among diseases of internal organs, and chronic non-calculous cholecystitis occurs in 367-446 cases per 100,000 population. According to statistics, every sixth Ukrainian has high blood pressure. Hypertension leads to severe complications (stroke, myocardial infarction, chronic renal disease) which take the first place among the causes of mortality in developed countries.

The combination of such diseases is quite common, which is the result of deterioration of socio-economic conditions, stressful situations, tobacco and alcohol abuse, poor nutrition etc. Therefore, a combination of chronic non-calculous cholecystitis and hypertension is often observed, which affects the course of each diseases and causes the intersection of several pathogenetic mechanisms.

There is widespread use of antispasmodic medications for improving the contractile function of the gallbladder muscles in hypermotor dyskinesia. Mebeverine hydrochloride is known as a modern myotropic antispasmodic drug. The pharmacodynamic of Mebeverine is associated with its ability to reduce the permeability of smooth muscle cells for Na +, blocking the depot filling extracellular Ca + and reducing the outflow of K +. In addition, the presence of hypertension requires prescription of antihypertensive drugs, in particular beta-blockers or Angiotensin converting enzyme blockers, the dose of which is discussed personally in each case.

The aim of the study was to develop appropriate treatment methods for patients with chronic non-calculous cholecystitis with hyperkinetic type of gallbladder dyskinesia in combination with hypertension.

Materials and methods of research. 36 women, aged 26 to 65, were monitored. Mebeverine hydrochloride was used in the complex treatment of

chronic non-calculous cholecystitis at a dose of 100 mg 2 times per day, correction of hypertension was performed by Berlipril.

Results and discussion. It is established that at the stage of clinical observation, the combination of these diseases has an adverse effect on each of them and potentiates the prolongation of the exacerbation stage. The severity of clinical manifestations depends not only on the inflammatory process in the gallbladder, but also hemodynamic changes due to the increase in blood pressure. The use of Mebeverine hydrochloride in the comprehensive treatment of chronic non-calculous cholecystitis in patients with concomitant hypertension allowed to control the pain and dyspeptic syndrome, and also have a significant effect on the level of hypertension, which was confirmed by a decrease in the dose of antihypertensives by 30-50%. This effect of the drug is the result of its antispasmodic effect and in addition explains its ability to block the flow of calcium ions to smooth muscle cells through potentially dependent channels and through the effect on receptor-dependent receptor neuron receptors.

Conclusions. The usage of Mebeverine hydrochloride in the complex treatment of patients with chronic non-calculous cholecystitis in combination with hypertension is pathogenetically justified and can be recommended for widespread use for patients with this comorbid pathology.

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ADIPOCOCIN'S IMBALANCE IN PATIENTS WITH HYPERTONIC DISEASE AND DIABETES MELLITUS

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The most common example of comorbidity is a patient with hypertension (AH) and type 2 diabetes mellitus (T2D). These diseases are associated with the early development of target organ lesions and subsequent cardiovascular accidents. AH and T2D have many common pathogenic mechanisms which influence the progression and course of comorbidity. Insulin resistance (IR) is a major pathogenic component of T2D and a factor in progression of cardiovascular complications.

The purpose of the research is to study the imbalance of adipokines (leptin and adiponectin) in patients with comorbidity of hypertension and diabetes mellitus.

Material and methods. The study comprised 441 patients, including 320 patients of the main group (with hypertension and diabetes mellitus); 90 patients of the comparison group (with hypertension, but without T2D); and 31 apparently healthy humans (control group).