

# ENDEMIC GITTER AND SOMATIC HEALTH IN THE POPULATION

## TEENAGE BOYS

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**Purpose of the work:** to assess the prevalence and specificity of chronic somatic diseases in a population of teenage boys of two age groups:

11-13 years and 14-17 years with goiter and compare them with a similar age group, but without endemic goiter (EZ).

**Materials and methods:** research and analysis of morbidity were carried out on based at the Ukrainian Endocrinological Center in the city of Kharkiv. In total it was analyzed based on the appeal data of 926 people. There were 708 boys aged 11-13 years old, 271 of them were diagnosed with EZ of 1-2 degrees, the control group consisted of 437

boys, without EZ. There were a total of 218 young men of the second age group, 14-17 years old, of which 87 were diagnosed with ESD, and 131 adolescents were included in the control group. Criteria enlargement of the thyroid gland (thyroid gland) were: assessment of the size of the thyroid gland by palpation in accordance with the WHO classification (2001), as well as ultrasound visualization, with in which an increase in thyroid size was considered to be an excess of thyroid volume 97 percentile in based on body surface area.

**Results and discussions:** when analyzing the incidence in boys 11-13 years old, the following was revealed: the presence of pathology of the upper respiratory tract (URT), including ENT pathology organs in boys with EZ were in 42.9% of cases versus 27.6% (without EZ) ( $p < 0.05$ ). Pathologia of the gastrointestinal tract (GIT) in 12.5% of cases with EZ versus 7.4% without ( $p < 0.05$ ).

Moreover, the most common pathologies were: chronic gastritis, chronic colitis, biliary dyskinesia. Diseases of the cardiovascular system (CVS) in boys with EZ were detected in 0.83% versus 0.2% without goiter, mainly prolapse mitral valve disease (MVP) and infectious-toxic cardiopathy (ITC). Did not have similar combinations were identified in the analysis of urinary tract diseases (Profit center). Dysmetabolic nephropathy was recorded more often: 3.3% without goiter, against 1.8% with the presence of EZ.

A slightly different picture emerged when analyzing morbidity in older age group: the incidence of upper respiratory tract diseases decreased to 10.5% versus 6.1%

( $p < 0.05$ ), no statistically significant difference was found in the analysis gastrointestinal morbidity 7.6% with EZ versus 7.0% without ( $p = 0.1$ ). The incidence of cardiovascular disease has increased compared with the younger group, almost 5 times, 4.1% with EZ versus 0.2% without EZ, and The following nosologies were more often registered: vegetative-vascular dystonia (VSD), ITC. Also, the incidence of UVP (chronic pyelonephritis, urethritis, balanoposthitis) in 3.0% with EZ, versus 1.7%

without it. Thus, the prevalence somatic chronic diseases are more often associated in patients with EZ.

**Conclusions:** in the population of boys 11-13 years old, RD is dominated by chronic pathologies were diseases of the gastrointestinal tract and upper respiratory tract, and they were significantly more often recorded in persons with EZ than without it. In the population of adolescents and young men, RD of the older age group 14-17 years old, the dominant pathology was diseases of the upper respiratory tract, cardiovascular system and urinary tract, which also were significantly more often detected in EZ.