

Analysis of the epidemiological risk factors of the cause of autoimmune diseases
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Background. Over the past decades, there has been a sharp increase in autoimmune pathology all over the world. In this regard, the study of the causes and risk factors for the onset of autoimmune diseases (AID) in the modern aspect is an important stage in the prevention of their occurrence.

Aim. To identify the risk factors for the occurrence of the most common socially significant AID - rheumatoid arthritis (RA), systemic lupus erythematosus (SLE) and type 1 diabetes mellitus (DM 1).

Materials and methods. 70 patients of the rheumatological and endocrinological departments of the Kharkiv Regional Clinical Hospital (RA - 35, SLE - 15, DM 1 - 20) were involved in the research. To assess the epidemiological risk factors of AID, there was developed a questionnaire that includes questions regarding the level of education, social and marital status, the nature of work, the level of prosperity, and information about bad habits. The control group consisted of 30 practically healthy persons, comparable in sex and age. Statistical analysis of materials was carried out using the methods of descriptive statistics, the Pearson χ^2 criterion.

Results. Analysis of epidemiological risk factors showed that women are more likely to suffer AID in the gender aspect, the ratio of men and women among RA patients was 1:4, among patients with SLE - 1:3, among patients with DM 1 - 1:2. In the age aspect, according to the WHO classification (2015), 45% of the patients surveyed were classified as young and middle-aged, and 10% were elderly.

Analysis of the level of education has shown that secondary and secondary special education among RA patients was observed in 68.6%, SLE in 66.7%, DM 1 in 75%, respectively. Analysis of the social situation has shown a significant proportion of the unemployed (RA - 54.3%, SLE - 60% and DM 1 - 70% of the surveyed). Analysis of the marital status of the patients shows significant number of divorced persons among them (RA - 20%, SLE - 26.7%, and DM - 11.5%) and those who never married (14.3%, 20% and 25% respectively).

Patients assess their material wealth in general worse than healthy ones (RA - 17.1%, SLE - 26.7%, DM 1 - 25%). At the same time, only 11.4% of RA patients, 13.3% of SLE and 15% of patients with diabetes mellitus don't have financial problems. 45% of patients, whose specific gravity in nosology was practically the same, confirmed the presence of harmful habits. The most frequently reported smoking (25% of patients - 1 pack per day, 10% - episodically) and alcohol consumption (10% - episodically).

Conclusions. The analysis of some epidemiological risk factors for the development of RA, SLE and DM 1, confirmed the presence of gender differences, showed a tendency to rejuvenation the contingent among this category of patients, revealed signs of social maladaptation, expanded the understanding of the problem of bad habits.

Further elicitation and comparison of epidemiological data among patients and healthy individuals will broaden the idea of possible contributing or impeding causes and development factors of a number of AID, the ultimate goal of which is the development of measures for their primary diagnosis and prevention.