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ABSTRACT BOOK

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SURGERY

Using similar tactics of patient management, in the remoteness of the time were re-operated 3 patients with relapses of FCM.

Conclusion. In the treatment of patients with benign breast diseases, a series of measures aimed at both surgical treatment and rehabilitation measures, which include hormonal correction and dynamic follow-up in the postoperative period, should be used. This tactic avoids dyshormonal, psychological disorders, and relapses of the disease.

Hroma Y.

COMPARATIVE CHARACTERISTICS OF BIODEGRADABLE STENTS AND METAL STENTS WITH SIROLIMUS

Kharkiv national medical university
Department of Operating Surgery and Topographic Anatomy
Ukraine, Kharkiv
Research advisor: ass. prof. Yevtushenko I.Y.

Introduction. Introduction of minimally invasive surgical interventions into clinical practice requires careful study of topographic and anatomical features of organs and systems, which makes it possible to determine optimal access to the affected area. Ischemic heart disease (IHD) is one of the leading causes of death in the modern world. Endovascular operations (stenting) are one of the main methods of treatment of IHD. A stent is a special construction, made in the form of a cylindrical frame, which is placed in the lumen of the vessel and provides an extension of the area narrowed by the pathological process. The first stenting of the coronary arteries in humans was carried out in 1986 by J. Puel. However, in 25-30% of cases the vessel narrowed again. Therefore, in 2003, 45 patients were implanted with the first stents that released sirolimus (a drug inhibiting the cycle of cell division), but the issue of increased thrombosis associated with a metal framework was not fully resolved, which required a long-term use of antiplatelet drugs. The next breakthrough in the endovascular treatment of IHD was the invention in 2015 of biodegradable stents made from biopolymers impregnated with a new generation of "Limus". These stents completely dissolve within 3 years and thus not only inhibit the development of excess tissue, but also contribute to the restoration of the normal structure of the endothelium of the vessel. The absence of a metal framework reduces the risk of thrombosis.

Aim. Review the literature on the results of studies on the use of metal and biodegradable stents and compare the risks of long-term complications.

Materials and methods. The literature review included about 150 articles in the PubMed, Scopus and Google Scholar databases. Of these, 14 corresponded to the profile of the study.

Results. According to the data obtained, after 2 years of follow-up, cardiac lethality was 3.2% in the group of biodegradable stents and 4.0% in the group of metal stents coated with sirolimus; the

incidence of myocardial infarction was 6.4% and 5.8%; the frequency of reocclusion was 6.6% and 7.3%, respectively. In addition, in some studies, the frequency of stent thrombosis was compared in patients who refused antiplatelet therapy one year after stenting. In the group with biodegradable stents, no such episodes were observed, whereas in the control group this indicator was 4.8%.

Conclusion. The literature review did not reveal significant differences in the frequency of long-term complications with the use of biodegradable stents and metal stents with sirolimus, but the absence of thrombosis with biodegradable stents in patients who refused to receive antiplatelet drugs suggests some advantages of these stents.

Kalinichenko D., Brek O.

INNOVATIVE METHOD OF INTRAOPERATIVE MONITORING OF INTRAPERITONEAL PRESSURE

Kharkiv national medical university
Department of General Surgery No. 1
Ukraine, Kharkiv
Research advisor: ass. Brek O.O.

Introduction. The main cause of the onset and development of abdominal hernia is a violation of internal abdominal pressure. Intraperitoneal pressure (IPP) is a pressure that is constantly maintained in the abdominal cavity. Normally, value is about 5 mm Hg (6.8 cm. Water pressure). The value of IPP is relative and depends on many factors: the degree of obesity, age and pathological changes of the anterior abdominal wall, diseases of the organs of the chest and abdominal cavity. Reduced IPP causes prolapse of the abdominal cavity. With loss of internal pressure, the walls of the abdominal cavity are not able to compensate for this difference in pressure, and the body begins to deform. That is why one of the most important factors that effects on the general condition of the patient after the plastic is the method chosen for measuring IPP. Aim: Definition of the effect of the method of measuring IPP during hernioplasty on the postoperative state of the patient with abdominal hernia.

Materials and methods. The plastic method is proposed taking into account the stage of development of hernia, which is established in the patient's upright position and the measurement of IPP using direct and indirect methods. The results of treatment of 50 patients with deformations of the abdomen, which were divided into two groups, were studied. The main group - 35 patients, who performed an indirect method of measuring IPP. The control group consisted of 15 patients, who used a direct method of measuring IPP. Indirect methods for determining IPP are based on measurement of pressure in hollow organs (in the stomach cavity, bladder), which are proportional to the intraperitoneal and correlate with its changes. As for the direct method of measuring IPP, this method of measurement includes intraoperative implantation of a balloon from an elastic material into a free