



**Conclusions.** Therefore, we conclude that HSS has no anti-inflammatory effect on septic cardiac tissue which is observed in animals with CLP+HSS after 24h on different tissues. Data have been reported that HSS in these experimental models reduced lung injury (which is most common organ dysfunction is sepsis) and produced improvements such as reduction in neutrophil accumulation and reduced albumin leak.

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**ADIPOCYTOKINESCHANGE IN PATIENTS WITH  
CARDIOVASCULAR DESEASE**

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**Introduction.** The most widespread among all cardiovascular diseases is the ischemic heart disease (IHD), which is found in 58% of patients. Despite significant progress in treatment, the prevalence of stable angina grows and reaches 20% among population.

**Aim.** In this connection we have established the objective of research – to define the imbalance of adipocytokines (adiponectin and visfatin) in patients suffering from stable angina and concomitant obesity.

**Material and methods.** We examined 110 patients with stable angina (Functional Classes II – III). All patients were divided into 2 groups: 1<sup>st</sup> group – patients with stable angina with concomitant obesity (n=80), 2<sup>nd</sup> group – patients with stable angina without obesity (n=30). The average age of the patients suffering from stable angina with concomitant obesity was 66,45±1,08 years old, and of the 2 group - 65,87±1,98. 66 men (60,95%) and 44 women (39,05%) havebeenexamined. The control group comprised 20 practically healthy people.

**Results.** According to the results of our study among the patients with stable angina with concomitant obesity the level of adiponectinis 17% lower and visfat in level is 9,3 % higher in comparison to patients without obesity. Adipokine exchange dysfunction contributes to development of atherosclerosis in patients suffering from stable angina with concomitant obesity through exhaustion of antiatherogenic capabilities of adiponectine together with activation of lipid disorders with the help of visfatin, which is confirmed by the detected correlation ties.

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**VASCULAR REMODELING AND ARTERIAL STIFFNESS IN  
HYPERTENSIVE PATIENTS WITH OBESITY**

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**Objective.** To investigate the peculiarities of common carotid artery (CCA) remodeling and stiffness in hypertensive patients with obesity.

**Material and method.** 82 hypertensive patients with preserved LV systolic function had been observed, including 26 non-obese patients (1<sup>st</sup> group), 30 patients with the 1<sup>st</sup> degree of obesity (2<sup>nd</sup>), and 26 with the 2<sup>nd</sup>-3<sup>rd</sup> degree of obesity (3<sup>rd</sup>). An



ultrasound examination of CCA gave a possibility to classify the patients according to its geometry (A.V. Agafonov, 2007) and to calculate the CCA stiffness indices. The statistical analysis was conducted using Mann-Whitney and Pearson  $\chi^2$  methods.

**Results.** Normal CCA geometry in the 1<sup>st</sup> gr. was observed in 17 (65,4%) patients, 2<sup>nd</sup> - 17 (56,7%), 3<sup>rd</sup> - 15 (57,7%),  $p=0,035$ ; concentric remodeling – in 4 (15,4%), 4 (13,3%) and 2 (7,7%) accordingly; concentric hypertrophy (CH) – in 4 (15,4%), 6 (20,0%) and 7 (26,9%,  $p=0,035$  within group); eccentric hypertrophy (EH) – in 1 (3,8%), 3 (10,0%) and 2 (7,7%) patients. Intima-media (IMT) thickening was observed in 42,3% non-obese and 64,3% obese patients,  $p=0,032$ . Petersen (Pet), Young (Einc) elastic modules as well as pulse wave velocity (PWV) were increasing with the degree of obesity,  $p>0,05$ . Cluster analysis by meanings of Pet and Einc gave a possibility to distribute the patients to 3 clusters,  $p=0,086$ . Body weight in the 1<sup>st</sup> cluster was 86,6 (73,5; 97,5) kg, 2<sup>nd</sup> – 91,7 (80,0; 100,9), 3<sup>rd</sup> – 98,3 (79,0; 108,8),  $p=0,059$ ; body mass index (BMI) – 31,0 (28,8; 35,2)  $\text{kg/m}^2$ , 31,3 (28,1; 37,3) and 32,1 (28,9; 35,8),  $p>0,05$ ; waist circumference – 106,5 (99,5; 112,5) cm, 112,5 (100,3; 117,5) and 115,5 (103,0; 119,5),  $p=0,071$ ; W/H ratio – 0,94 (0,91; 1,01), 0,96 (0,91; 0,98) and 0,97 (0,94; 1,04),  $p=0,048$ . The age, levels systolic and pulse BP also had the highest values in the patients with higher stiffness indices,  $p<0,01$ .

**Conclusion.** Hypertensive patients with obesity were characterized by higher prevalence of CCA remodeling. Arterial stiffness indices were associated with age, weight, waist circumference, W/H ratio, SPB and PBP, but not BMI of patients.

## Gruts O.

### THE HUMAN LEUKOCYTE ANTIGENS AND ANKYLOSING SPONDYLITIS

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**Introduction.** Ankylosing spondylitis (AS) is a major subtype of a group of chronic inflammatory diseases known as spondyloarthropathies. Genetic and environmental factors play an important role in their pathogenesis of AS, those associated with the spondyloarthropathies are HLA B2702, B2704, and B2705. Confirmation of diagnosis requires characteristic X-ray findings: blurring of bony margins of joints (in early stages), bilateral sacroiliac involvement, patchy sclerosis with superficial bony erosions, eventual squaring of vertebral bodies, and bamboo spine with complete ankylosis. Diagnosis of AS is strongly suggested by typical symptoms, a positive family history, and presence of the human leukocyte antigens (HLA-B27). Recently, HLA-B27 has been used as diagnostic criteria to detect spondyloarthropathies .

**Material and methods.** The study included 53 patients. HLA-B27 typing was done by microlymphocytotoxicity and/or by sequence specific primers (SSP) using commercial kits. Patients were categorised as Ankylosing Spondylitis (AS), Undifferentiated Spondyloarthropathy.