



## INVITATION

Dear \_\_\_\_\_,

We have great honor to invite you to participate in the 6<sup>th</sup> International Scientific Interdisciplinary Conference (ISIC) for medical students and young doctors that will take place from May 16<sup>th</sup> till May 17<sup>th</sup>, 2013 at Kharkiv National Medical University, Kharkiv, Ukraine (Lenina avenue, 4, the main building).

Kharkiv National Medical University is the oldest higher educational institution of Ukraine. It is the member of International association of the world universities, registered by UNESCO. By range results among the higher educational institutions of Ukraine “Sofia Kyivska” Kharkiv National Medical University was the best and it obtained the Honorary diploma.

The International Scientific Interdisciplinary Conference (ISIC) is one of the largest biomedical conferences in Ukraine and one of the main events in Kharkiv National Medical University. The main aim of the Conference is to give a possibility to young doctors to share their ideas and views, to get acquainted with research work and to present the results of their scientific investigations to the international auditorium. This does not only enhance the international, interdisciplinary, scientific exchange, but also strengthens the cooperation and cohesion of united Europe and Ukraine.

The scientific and cultural programmes of the 6<sup>th</sup> International Scientific Interdisciplinary Conference (ISIC) are scheduled to be outstanding, and therefore we may expect that, with your participation, the forthcoming ISIC meeting in Kharkiv National Medical University will be a success and a unique opportunity to share advances in actual problems of medicine.

We are looking forward to welcoming you to ISIC- Conference.

Kind regards,

Organizing committee



**Methods:** 85 anemic CHF and CKD patients were examined (age  $68 \pm 10$  years) - 55% male and 45% female. It was found that 60% of all anemic patients had III NYHA class and 40% of them - IV NYHA class. Control group included 15 non-anemic patients (age  $66 \pm 11$  years) - 69% male and 31% female. Structural and functional parameters of myocardium were investigated by echocardiography. Beck Depression Inventory was used to assess the presence and character of depressive disorders.

**Results:** Compared to controls and anemic CHF and CKD patients had lower haemoglobin ( $P < 0.0001$ ), dilatation of the left and right heart cavities, lower ejection fraction ( $P < 0.05$ ). Increasing of depressive symptoms were found with increasing severity of anemia in patients with CHF and CKD.

**Conclusion:** The progression of anemic syndrome was accompanied by dilation of the left and right cavities of heart, inotropic function decreasing. In patients with CHF and CKD observed depressive disorders which increased with severity of anemia.

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**PARTICULARITIES OF INFLAMMATORY MARKERS CHANGES IN PATIENTS WITH CHRONIC KIDNEY DISEASE COMPLICATED WITH ARTERIAL HYPERTENSION.**

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**Background.** Despite the large amount of research on the relationship of hypertension and chronic kidney disease (CKD), there are open questions about their cause-effect relationships. The clinical value of those markers as C-reactive protein (CRP), cytokines (tumor necrosis factor  $\alpha$  – TNF- $\alpha$ , IL-1 $\beta$ ), a combination of adhesive properties is essential to determine the activity of inflammation.

**The aim** was to study the dynamics of inflammatory markers CRP, IL-1 $\beta$ , IL-4, TNF- $\alpha$  – under the influence of hypertension in patients with CKD.

**Methods:** Included in the study 56 patients with CKD, the first group ( $n=27$ ) was represented by patients with high blood pressure (BP) - systolic blood pressure  $> 140$  mm Hg., BP diastolic  $< 90$  mm Hg., the second group - patients with CKD and normal values of BP. The control group consisted of 20 healthy individuals. Cytokines and CRP levels were determined by ELISA.

**Results.** Revealed a significant increase of inflammatory markers CRP, IL-1 $\beta$ , TNF- $\alpha$  in patients with CKD compared with the control group, whereas anti-inflammatory IL-4 was reduced. For chronic kidney disease with hypertension were characterized by the increasing in CRP, TNF- $\alpha$  and IL-1 $\beta$  and decreasing of anti-inflammatory interleukin-4. It is important to note, that in comparison with the group of patients with normal pressure, patients with hypertension had significantly elevated levels of TNF- $\alpha$  ( $65,25 \pm 4,57$ ,  $p < 0,05$ ).

**Conclusions.** Joining hypertension to CKD leads to greater activation of the inflammatory process in these patients. The level of anti-inflammatory IL-4 was



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