



ABSTRACT BOOK



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THERAPY



**INTERNATIONAL SCIENTIFIC
INTERDISCIPLINARY
CONGRESS**

Qalasi Mohanad

BRONCHIAL THERMOPLASTY

Kharkiv National Medical University

(Department of Internal Medicine No. 2, Clinical Immunology and Allergology)

Research advisor: Honchar A.

Kharkiv, Ukraine

Introduction. Asthma is a chronic inflammatory respiratory disease in which variable air obstruction and symptoms of cough, wheeze, and dyspnea are noted.

Materials and methods. Bronchial thermoplasty is a non-drug procedure for severe persistent asthma which gives thermal energy to the airway wall in a controlled way in order to reduce excessive smooth muscle of the airway. By Reducing smooth muscle of airway, it decreases the efficiency of the airways to constrict, therefore lowering the rate of asthma attacks. Bronchial thermoplasty is mainly given by the Alair System and is carried out in three O.P. procedure visits, each vaguely three weeks apart. The first mainly manages the airways of the right lower lobe, the second manages the airways of the left lower lobe and the last, manages the airways in both upper lobes. Once all three procedures are done the bronchial thermoplasty management is done successfully.

Results of research. Bronchial thermoplasty is done with bronchoscopy where patient is under sedation of moderate rate. All possible airways, with the exception of the right middle lobe, are managed by bronchoscopy. Carrying out bronchial thermoplasty is quite a task and the duration of the treatment for a single lobe is often time consuming than during the usual bronchoscopy. Therefore, bronchial thermoplasty is regarded as a complex method and is mainly for the highly experienced and skilled bronchoscopist. Management of patient is vital in any such conditions and during extensive procedure of bronchoscopy. Therefore, patient is selected with extreme care, their preparation and management of procedure is well examined. Postoperative care and follow-up is done in order to examine the after effects of the procedure, and if any complications arise. x trials that include Y patients have been analyzed covering the period of 2010-2017.

Conclusions. Trials for BT efficacy compared to conventional treatment Bronchial thermoplasty complements maintenance of asthma medications by implementing an enduring control of asthma and remodeling an asthma-oriented life. Also, bronchial thermoplasty is manifested to decrease extreme exacerbations (asthma attacks) and make life easier.

Salawu K., Raliat A.

KOUNIS SYNDROME (HYPERSENSITIVITY CORONARY SYNDROME)

Kharkiv National Medical University

(Department of Internal Medicine No. 2, Clinical Immunology and Allergology)

Research advisor: ass. Titova A.

Kharkiv, Ukraine

Introduction. Kounis syndrome is a rare condition characterized by unstable vasospastic, nonvasospastic angina, or acute myocardial infarction and is triggered by the release of inflammatory mediators following an allergic insult. Factors which trigger Kounis syndrome include: drugs (analgesics, antibiotics, and anticoagulants), environmental factors (jellyfish sting, poison ivy, and viper venom), food induced

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