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ТЕЗИ ЗА МАТЕРІАЛАМИ

ХІV ВСЕУКРАЇНСЬКОЇ НАУКОВО-ПРАКТИЧНОЇ КОНФЕРЕНЦІЇ МОЛОДИХ ВЧЕНИХ З МІЖНАРОДНОЮ УЧАСТЮ

"АКТУАЛЬНІ ПИТАННЯ КЛІНІЧНОЇ МЕДИЦИНИ"

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ВІДПОВІДАЛЬНИЙ СЕКРЕТАР:

О.О. Токаренко, к .мед. н., голова Ради молодих вчених.

Члени редколегії:	H.O.	Скороходова, д. мед. н., професор;
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- В.Б. Мартинюк, к. мед. н., доцент;
- В.П. Медведєв, к. мед. н., доцент;
- В.Б. Козлов, к. мед. н., доцент;
- О.О. Березін, заступник голови Ради молодих вчених.

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Відповідальність за вірогідність фактів, цитат, прізвищ, імен та інших даних несуть автори. У тезах збережено авторське подання матеріалів.

ANALYSIS OF COMPLEX TREATMENT OF PATIENTS WITH OSTEOARTHRITIS COMBINED WITH HYPERTENSION USING ALGOFUNCTIONAL LEKEN INDEX *M.V. Bondar¹*, *T.V. Sroganova²*, *L.P. Kuznetsova³*

¹State institution "Zaporizhzhya Medical Academy of Postgraduate Education" ²Zaporizhzhya State Medical University of Ukraine

³Scientific Supervisor - Doctor of Medical Sciences, Professor, Professor of Department of General Practice - Family Medicine, Gastroenterology, Physical and Rehabilitation Medicine

State Institution «Zaporizhzhya Medical Academy of Postgraduate Education of the Ministry of

Health of Ukraine»

Introduction: Among diseases that significantly affect health, osteoarthritis ranks 4th in women and 8th in men. In persons of both sexes over 70 years old, osteoarthritis occurs in almost everyone, and in the last decade its prevalence has been steadily increasing. The social significance of osteoarthritis is determined by the growth of the associated disability and disability, especially in older age groups, as well as a sharp decrease in the quality of life in this disease. The advantage of assessing clinical efficacy using the alkaline functional Leken index is the ability to study a large number of parameters and their dynamics during treatment. In addition, in terms of statistical analysis of the results, the probability of recording erroneous measurements decreases

Objective: to evaluate the effectiveness of therapy 12 months after the start of treatment in patients with osteoarthritis (OA) combined with hypertension (GC) on the background of treatment with melbeci at a dose 7,5 mg / of day.

Material and methods: 90 patients with stage I-II OA in combination with GC of the II degree, 2-3 degrees were under observation in an outpatient setting. The mean age of patients with OA was $64,4 \pm 7,5$ years, patients with OA in combination with GC $62,13 \pm 8,2$, patients with OA in combination with GC with gastropathy due to non-steroidal anti-inflammatory drugs (NSAIDs) was $64,81 \pm 1,3$. The duration of the disease was in patients with OA - $(9,66 \pm 4,7)$ years, in patients with comorbid OA and GC - $(9,4 \pm 6,0)$ years, respectively, in patients with comorbid OA and GC with gastropathy due to NSAIDs - $(10,4 \pm 5,6)$ years, respectively.

To perform the objectives of the study, all patients were divided into 4 groups of 30 patients each. The first group - patients with OA without GC, the second - patients with a combination of OA and GC, the third group of patients with a combination of OA and GC and gastropathy due to NSAIDs, the fourth group of comparisons were almost healthy individuals.

All patients complained of pain of varying severity. Patients of the first group as a basic therapy received melbek at a dose of 7,5 mg per day; and antihypertensive drug (difors at a dose of 80 or 160 mg per day) - were taken by patients of the second and third groups. The duration of treatment was 12 months.

All patients at the beginning of the study and after treatment underwent a general clinical examination: general blood test, office blood pressure (BP), electrocardiography, daily blood pressure monitoring, radiography of the knee joints, patients of the third group underwent esophagoduodenoscopy at the beginning and after treatment.

The results of the study and their discussion: according to the results obtained, the positive effect of meloxicam led to a significant reduction in pain in the first, second and third groups according to the Leken index (27.1% and 30.9%, 26.4% p < 0.05).

Conclusions:

1. The tested scheme of treatment of patients with OA, with the use of Melbeck indicates the effectiveness and statistically significant reduction of pain, improvement of the functional state of the musculoskeletal system in patients with isolated OA and in combination with GC.

2. The analgesic and anti-inflammatory effect of melbek and its positive effect on the clinical course of OA were also revealed: joint pain was reduced, functional capacity was increased, general well-being and quality of life of patients were improved.

3. In conclusion, it should be noted a significant decrease in the total Leken index for COP, which most reflects the state of severity of functional changes and that most fully affected the reduced severity of pain at rest and during walking. The size of the maximum walking distance was also increased and daily activity was improved.

Prospects for further research: we consider it appropriate to continue prospective observation of patients in order to further study the effects of melbeck in patients with comorbid diseases.

Conflict of interest: no conflict of interest.

RISK FACTORS OF ARTERIAL HYPERTENSION AMONG ARAB MEDICAL STUDENTS

N.O.E. Elimam¹, H.A.S. Jawish²

¹Bogomolets National Medical University, Kyiv, Ukraine Department of Propaedeutics of Internal Medicine N2

²Scientific adviser – V.A. Khomaziuk, MD, PhD, Associate Professor

Introduction. Hypertension (HTN) is the most important modifiable risk factor for premature cardiovascular diseases (Bloch M. et al., 2020). The processes of urbanization and social development lead to significant changes in the lifestyle of young people and increase the risk factors of HTN. Data on epidemiology of HTN in the Arab world are very limited. According to Tailakh A. et al. (2014), the overall estimated prevalence of HTN was 29.5% (n = 45379), which