However, the changes in patients with II degree obesity were more significant. In this same group the patients showed a more pronounced impairment of renal function, indicating a more severe course of disease in obese patients. It means that this variant of the disease is more unfavorable.

**Key words:** chronic kidney disease, obesity, hyperlipidemia, lipids

### 119. LIPID PROFILE CHARACTERISTIC IN PATIENTS WITH DIABETIC NEPHROPATHY III-IV STAGES ACCORDING TO AGE AND SEX

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**Introduction.** Diabetic nephropathy (DN) is one of the most serious microvascular complications of diabetes mellitus (DM).

Aim of the study. To examine age and gender characteristics of lipid imbalance in blood of patients with DN III-IV stage.

**Material and methods.** 34 patients with diabetes type 2 diabetes aged 40 to 65 years, with disease duration of 10 - 15 years, were under observation under. All the patients divided into two groups: 13 patients with DN III st. were included to group 1. 11 patients with DN IV st.- in 2 groups. The control group were 15 healthy individuals. Patients in all groups were divided regarding to their age and gender. All the patients under study were tested for total cholesterol, triglycerides, HDL cholesterol, LDL cholesterol.

**Results.** Analysis of clinical and laboratory parameters of patients studied showed lipid metabolism serum as a probable increase in levels of total cholesterol, triglycerides and LDL cholesterol against decrease in HDL-C compared with results of healthy individuals (p < 0.05). Moreover, the most pronounced imbalance of lipid metabolism was found in patients who had stage IV DN (p < 0.05). Gender distribution in the groups of patients showed that more pronounced lipid imbalance was in women than in men. It should be noted that the significant increase in LDL cholesterol was observed in both men and women of DN IV st. (P < 0.05). Thus, a significant imbalance of lipids in patients with DN III - IVst. was present in all patients with probable gender difference, especially with DN IV st. According to the age group studied patients were divided into two age groups: group I - patients adulthood (45-65 years) and group II, patients with DN elderly over 65 years. Analysis of the data revealed that lipid metabolism most significantly deviated in persons of mature age compared with older patients (p < 0.05) and depended on the stage of DN.

**Conclusions.** There were significant gender differences in lipid imbalance in patients with DN III-IV stages of its predominant in women. Lipid imbalance is most pronounced in adulthood patients with DN III-IV st., manifested by a significant increase in the level of LDL (p < 0.05). Detected probable increasing triglycerides in older patients with DN stage IV compared with those of patients of mature age (p < 0.05).

Key words: chronic kidney disease, obesity, hyperlipidemia, lipids

## 120. CHARACTERISTIC OF THE LIPID PROFILE IN PATIENTS WITH DIABETIC NEPHROPATHY III-IV STAGES

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Scientific advisers: M.S. Berezova, S.O. Akentiev Bukovinian State Medical University, Chernivtsi, Ukraine **Introduction.** Diabetic nephropathy is one of the most common causes of end-stage chronic kidney disease. Hyperglycemia and insulin resistance may lead to dyslipidemia. Dyslipidemia is one of the risk factors for the development of diabetic nephropathy.

Aim of the study. To determine possible correlations between indicators of lipid profile parameters and violation renal function in patients with diabetic nephropathy.

**Material and methods.** The study was performed on 67 patients who received medical treatment and care at the Chernivtsi Regional Clinical Hospital for a 3-month period. Women - 39 (58.21%) and men -28 (41.79%), mean age  $62.8 \pm 9.3$  (40-65) years with diabetes duration of 10 - 15 years. The study groups included 36 patients with diabetic nephropathy III stage (group 1) and 31 patients with diabetic nephropathy IV stage (2 group). The control group were 17 healthy individuals. The levels of total cholesterol, triglycerides, high-density lipoproteins cholesterol, low-density lipoproteins cholesterol was determined in all subjects.

**Results.** The levels of total cholesterol, triglycerides and low-density lipoproteins cholesterol were significantly higher in the case of patients with diabetic nephropathy compared with results of healthy individuals (p < 0.05). The most significant imbalance of indicators of lipid metabolism was found in patients who had diabetic nephropathy IV stage (p < 0.05).

**Conclusions.** The level of lipid imbalance was most pronounced in patients with diabetic nephropathy IV stage. Diabetic dyslipidemia correlates with the progression of diabetic nephropathy. Correlation is moderate. To prevent deterioration of renal function is necessary timely diagnosis and the appointment of adequate treatment.

Key words: chronic kidney disease, diabetic nephropathy, hyperlipidemia, lipids.

# **121.** FACTORS THAT INFLUENCE THE ACTIVITY OF SYSTEMIC LUPUS ERYTHEMATOSUS

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**Introduction.** Systemic lupus erythematosus (SLE) is a chronic autoimmune disease characterized by a diffuse chronic inflammatory process that can affect any organ or system and is associated with the overproduction of autoantibodies, the most representative of which are antinuclear antibodies. Globally, Lupus affects 40-100 people in every 100 000. Lupus strikes mostly women of childbearing age. However, men, children, and teenagers develop lupus, too. Most people with lupus develop the disease between the ages of 15-44.

Aim of the study. The disabling nature of SLE, the absence of curative treatment and the difficulties in diagnosing require the highlighting of the factors that induce or influence SLE activity.

**Materials and methods.** The retrospective study of a group of 30 people who were treated or monitored in the Republican Clinical Hospital in Chisinau in 2017.

**Results.** During the study, were identified the factors to which the patients have been exposed. 37% of patients had long contact with pesticides and other chemical substances, in 7% SLE was drug-induced, in 3% SLE was induced by the Epstein-Barr virus, in the remaining 54% the cause of the disease has not been identified. After analyzing the distribution of Lupus patients, it was noticed that the districts with the biggest number of patients with Lupus are those districts where the level of soil and air pollution exceeds the limits or the norm.

**Conclusions.** The influence of chemical substances remains the most important factor that induces SLE in the Republic of Moldova. SLE presents great difficulty in establishing the diagnosis and the factors that have induced this disease.

Key words: SLE, chemical substances, consequences of pollution, factors