systemic lupus erythematosus. Corellational analysis of clinical manifestations of pulmonary paraclinical indices and efficacy in patients with SLE.

Scientifical inovation of the obtained results: Scientifical inovation lies in deciphering certain etiopathogenicaspects, clinical, diagnostic methods and treatment principles of LUPSA erythematosus disease based on a clinical study analytically. In this analytical study were assessed overall and peculiarities of clinical laboratory changes in patients with systemic lupus erythematosus to them by the correlation index inerpreta organic damage of the disease.

The theoretical importance and value of the work: The paper aims to highlight the proportion of cases with clinical and laboratory manifestations, which gives Pulmonary severity and tracking progress under treatment. SLE is a collagenosis manifested by both cutaneous and musculoskeletal impairmen, but also visceral, renal and pulmonary damage the nervous system dictates the evolution and prognosis. Through early detection and appropriate treatment setting, with regular monitoring, these developments may relieve severe in most situations.

The material and research methods: In accordance with the purpose and the investigational objectives outlined was made a retrospective descriptive study conducted on a group of 54 patients, 35 showed impaired SLE and 19 patients treated in clinical pulmonary Republican Hospital and the Hospital "Sf.Treime". In this study were included 54 patients, treated stationary PMS .S.C.R and "Sf. Treime" in 2013-2014.

Our results and discussion: Retrospective descriptive study was conducted to performance aspects: clinical course, diagnosis and treatment of lung injury, correlation incidence of systemic lupus erythematosus and pulmonary damage depending on age and sex.

138. EVALUATION OF PROTEASE-INHIBITORY BLOOD SYSTEM WITH GASTROESOPHAGEAL REFLUX DISEASE IN PATIENTS WITH DIABETES TYPE 2

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The aim of our study was to investigate the condition of proteinase-inhibitor system of blood with gastroesophageal reflux disease (GERD) in patients with diabetes mellitus (DM) type 2.

Materials and methods: 7 patients with erosive GERD, combined with diabetes type 2 (1A group), 9 patients with nonerosive GERD with the diabetes type 2 (group 1B) in the background, 7 patients with erosive GERD, with no endocrine diseases detected during a detailed examination (group 2A), 8 patients with nonerosive GERD (2B group). The control group consisted of 10 healthy individuals (PCC) due to the age (3rd group). The evaluation of proteolytic activity was carried out by determining the level of lysis of asoalbumin, asokazein and azokol.

Results. It was established that in the absence of diabetes type 2 in patients with GERD occurs amplification lysis of small dispersed proteins to 94% in group 2A (p <0,05) and to 8.9% in group 2B (p >0,05); lysis of large dispersed proteins – to 64 % (p <0,05) and to 19,4% (p >0,05); lysis of collagen - to 46 % (p <0,05) and to 16,2% (p >0,05) , according to USO. GERD with the diabetes type 2 (group 1B) in the background (group 1B) is accompanied by increased lysis of asoalbumin to 114% in group 1A (p <0,05) and to 13.8 % in group 1B (p >0,05), lysis of asokazein to 109 % (p <0,05) and to 37,9% (p <0,05); azokol lysis to 47 % (p <0,05) and to 21,6% (p <0,05) according to the third group of patients. In patients with erosive GERD combined with diabetes type 2 and in the absence of it, the concentration of α 2- macroglobulin (MG) significantly decreased to 36,1% (p <0,05) and to 29,6% (p <0,05) according to the USO. In groups 1B and 2B, on the contrary , the level of α 2- MG increased compared with USO 2.5 times (p <0,05) and 2 times (p <0,05), with the probable difference between them (p <0,05).

Conclusion. GERD is accompanied by increased proteolytic activity of plasma in the background of reduction of α 2-MG (in the presence of erosions) and increased α 2-MG content (in the form nonerosive GERD).

Keywords: proteolysis, diabetes, gastroesophageal reflux disease.