

Conclusion: Reduced oxygen saturation in patients with coronary artery disease with concomitant COPD leads to increased myocardial ischemia with possible destabilization of angina.

Key words: angina, coronary vasoconstriction, coronary heart disease.

GOUT AND CARDIOVASCULAR RISK: A COHORT STUDY

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Introduction: Gout is an inflammatory arthritis characterized by self-limiting but excruciatingly painful acute attacks. The relation of gout and hyperuricaemia in cardiovascular diseases has been well documented. It is known, that the cardiovascular disorders are the main reason of death in patients suffering from gout, and also that high blood pressure and hypercholesterolaemia are the main pathogenic mechanism of metabolic changes confounding influence on cardiovascular risk in such patients.

Objective: Our aim was to assess the prevalence cardiovascular risk factors in gout patients.

Methods: A total of 102 consecutive adult male patients aged 41-72 years diagnosed with gout between 2010 and 2012 were enrolled in the study. Hyperuricemia was defined as serum uric ≥ 420 $\mu\text{mol/L}$. SCORE index was used for cardiovascular risk assessment, where low risk was defined when SCORE $< 1\%$, moderate risk was defined when $1\% \leq \text{SCORE} < 5\%$, high risk - $5\% \leq \text{SCORE} < 10\%$, and very high when SCORE $\geq 10\%$.

Results: All patients aged ≤ 45 years had low cardiovascular risk factors which did not depend on smoking status, blood pressure and cholesterol level. These results differed from those obtained in group aged from 46 to 59 years, where moderate and high cardiovascular risk was found in equal proportion among non-smokers. In the same age group, the smokers with hypertension had high and very high cardiovascular risk. Finally, the group of patients aged ≥ 60 years, 56% had very high cardiovascular risk, 34% had high risk, and only non-smokers (10%) had moderate cardiovascular risk.

Conclusions: Gout is associated with cardiovascular risk indicators. The prevalence of hypercholesterolaemia, hypertension and smoking increases with age and should be considered in the complex management of patients suffering of gout.

Key words: gout, cardiovascular risk, hypertension, hyperuricaemia, hypercholesterolaemia, SCORE index.

ARRHYTHMIAS IN RHEUMATIC HEART DISEASES PATIENTS

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Introduction: In recent decades the rheumatism is decreasing. The number of patients affected by rheumatic heart disease failure in the world reaches 15.6 million, and annually are registered about 470000 new cases. The rhythm disturbance is common in these patients. The atrial fibrillation is described in medical literature as the most frequent arrhythmia in patients with mitral valve involvement. In mitral stenosis the prevalence of atrial fibrillation increases with age. It is known that the atrial fibrillation is

present in 10% of patients aged up to 30 years, while the age over 50 years its reaches till 50% cases.

Objectives: To analyze the characteristics of arrhythmia in rheumatic heart disease at patients hospitalized in the Institute of Cardiology from Republic of Moldova.

Methods: In the study where included 24 patients with defined diagnosis of rheumatic heart disease, 18 (75%) men and 6 (25%) women, median age 58 years old (range 41-75), 12 (50%) patients with mitral valve disease, 7 (29.1%) patients with aortalvalve disease, and 5 (20.8%) patients with associated involvement. We analyzed the patients' complaints, disease history, and the results of the clinical and laboratory examination, the Electrocardiography (ECG) in the resting position, transthoracicechocardiography (EcoCG), Doppler EcoCG.

Results: In the study group were prevailed patients from countryside-16 (66.6%) patients versus 8 (33.3%) patients from urban space. The data analysis showed that ½ (50%) of the patients suffered acute rheumatic fever in childhood (ARF). The common complaints at admission were dyspnea in 20 (83.3%) cases, peripheral edema at 15(62.5%), patients with syncope 3 (12.5%). The ECG evaluation showed the atrial fibrillation (AF) at 16 (66.6%) patients, included 7 (29.1%) with chronic atrial fibrillationform and4 (16.6%) patients hadatrial paroxysmal fibrillation. Theatrial flutter and the extrasystolies where found less 3 (12.5%) and 2 (8.3%) patientsrespectively. The conductivity disturbance certified in 9 (37.5%) patients, including left branch block5 (20.8%) patients, rightbranch block3 (12.5%) patients, and the atrio-ventricular block1 (4.16%) patient. TheEcoCG analysis confirmed the structural changes on valves: mitral valve stenosisin 8 (33.3%) patients, mitral valve regurgitation with different degrees- 4 (16.6%) patients, aortic orifice stenosis-4 (16.6%)patients, and the aortic regurgitation- 3 (12.5%) patients, the tricuspid valve regurgitation in 3 (12.5%) patients.The cardiomegaly has been found in 13 (54.1%) patients, more frequently left atrium dilatation at 9 (37.5%) patients.

Conclusion: The atrial fibrillation was the most frequent arrhythmias in our study group certified at 2/3 of patients, predominantly chronic form at patient with mitral valve involvement.

Key words: Arrhythmia, rheumatic heart disease, Electrocardiography, Echocardiography.

PREVALENCE OF METABOLIC SYNDROME AMONG PATIENTS WITH CARDIOVASCULAR DISEASES

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Introduction: According to the criteria of such organizations as World Health Organization (WHO) and the American Association of Clinical Endocrinologists (AACE) metabolic syndrome (MS) is a disease that can be defined as a complex of metabolic, hormonal and clinical disorders, which are high risk factors for cardiovascular diseases, based on primary insulin resistance and compensatory systemic hyperinsulinemia. A person with MS has a greatly increased risk of cardiovascular disease and premature death. There are 40 - 60 million people suffering from MS in Europe, according to WHO reports.

The **purpose** of this work is to investigate the prevalence of the MS among patients who suffer of different cardiovascular diseases.

Methods and results: At the cardiology department of Vinnytsia Pirogov Regional Clinical Hospital, 174 patients (88 women and 86 men) with MS were examined. First, all the patients filled questionnaire. Afterwards, the body mass index (BMI), waist circumference, blood pressure, heart rate, blood glucose,