

Patients with high risk were older, they required a longer hospitalization, they had higher blood pressure values and showed more pronounced changes in the lipid metabolism.

**Conclusions:** Most of the patients with unstable angina pectoris have a high risk of cardiovascular events, which correlates with a death rate over 2% per year. Assessment of cardiovascular risk allows choosing of an adequate treatment (drug therapy or revascularization) which would increase the survival rate.

**Keywords:** atherosclerosis, cardiovascular risk, angina pectoris, Duke score.

## THE ATRIAL NATRIURETIC PROPEPTIDE PLASMA LEVELS IN PATIENTS WITH NONVIRAL LIVER CIRRHOSIS OF DIFFERENT AGE

**Prysyazhnyuk Vasyl, Prysyazhnyuk Iryna**

*Academic adviser:* Voloshyn Alexander, M.D., Ph.D., Professor, Bukovinian State Medical University, Chernovtsy, Ukraine

**Introduction:** Atrial natriuretic propeptide (proANP) is one of the most reliable markers of heart failure and independent predictor of cardiovascular risk in cardiac patients. The role of this cytokine in the development of hepatologic diseases is less investigated.

**The aim:** Our study purpose was to study possible age-related features of proANP plasma content in patients with nonviral liver cirrhosis and its relationship with biochemical blood parameters.

**Materials and Methods:** Our study involved 48 patients with nonviral liver cirrhosis. All the patients were divided according to age: first group (30–44 years) included 14 patients, second group (45–59 years) – 18 patients, third group (60–74 years) – 16 patients. Control group consists of 8 healthy volunteers. ProANP plasma content together with plasma activities of aspartataminotransferase (AST), alaninaminotransferase, total laktatdehydrogenase (LDH), alkaline phosphatase, gammaglutamiltransferase and plasma contents of glucose, cholesterol, tryglycerides, urea, creatinine, bilirubin and albumin were studied.

**Results:** ProANP plasma concentration was significantly higher in patients with liver cirrhosis of all age groups compared with the healthy individuals. In the first group it was  $1,51 \pm 0,20$  nmoll/l, in the second group –  $1,56 \pm 0,22$  nmoll/l, in the third group –  $1,85 \pm 0,37$  nmoll/l, while the control levels were  $0,31 \pm 0,04$  nmoll/liter. There was also a trend towards a gradual increase of the proANP blood level with age. For patients with liver cirrhosis established a direct correlation between the plasma content of proANP and urea, creatinine concentrations, AST and total LDH activities.

**Conclusions:** The plasma content of proANP increases in patients with liver cirrhosis of all ages. This increase correlates with the activity and severity of liver cirrhosis and is the highest in older patients with decompensated liver cirrhosis.

**Key words:** liver cirrhosis, atrial natriuretic propeptide.

## EVALUATION OF OSTEOARTHRITIS DURATION ON THE BONE MINERAL DENSITY

**Gusak S., Yatsushun Kh., Bodnar R., Lepyavko A., Slaba U.**

*Academic adviser:* Smiyan S., M.D., Ph.D., Ternopol Medical University “I. Ya. Gorbachevsky”, Ternopol, Ukraine

**Introduction:** Among the rheumatic diseases osteoarthritis ranks first in the world and is the second spread ailment after ischemic heart disease and cerebrovascular disease in Europe (Kovalenko V. M., 2009). The gradual development of osteoporosis and its invisible clinical signs lead to disease progression and severe consequences. Involutive and pathological changes in cartilage and bone tissue lead to the development of osteoarthritis and osteoporosis which are interconnected, inter-processes and progress with age and are parallel.

**Aims:** The purpose of the work was to stress the impact of osteoarthritis duration on the bone mineral density. To achieve this goal, we examined 87 patients with primary osteoarthritis (OA), aged from 35 to 76 year ( $57,28 \pm 2,2$  year), where women predominate.

results. The average duration of osteoarthritis was ( $7,56 \pm 1,02$  year). Osteopenic syndrome was diagnosed in 41,38% ( $n = 36$ ) patients, among which 11 patients were diagnosed with primary osteoporosis.

**Results:** Study of osteoarthritis disease duration influences basic densitometric parameters of the bone showing reliable differences between groups of patients with disease duration below 5 years and over 10 years.

Bone mineral density decreases consequently with increasing of osteoarthritis disease duration, in the group with duration of OA over 10 years it is ( $0,826 \pm 0,04$ ) g/cm<sup>2</sup>, which is 14,32% less than in the group with duration of disease below 5 years and by 10,02% less than in the group with disease duration from 5 to 10 years.

Indicator Young - Adult was less in patients with disease duration more than 10 years - ( $70,33 \pm 3,38$ )%, which is 13,30% less than in patients with disease duration below 5 years and 7.43% percent less than in patients with disease duration from 5 to 10 years.

The percentage patient's BMD deviation from the average population rate is the lowest in patients with a osteoarthritis duration more than 10 years and is ( $75,67 \pm 4,98$ %), which is 13,58% less than in the group with duration of the disease of «1 - 5 years» and by 11,37% less than in the group with the duration of disease of «5 -10 years.»

**Conclusion:** Summarizing we can say that the degree of bone demineralization increases consequently with duration of OA disease.

## TEST-RETEST RELIABILITY OF PATIENTS GLOBAL ASSESSMENT, PHYSICIAN GLOBAL ASSESSMENT AND WOMAC INDEX IN KNEE OSTEOARTHRITIS

**Salaru Virginia, Mazur-Nicorici Lucia**

*Academic adviser:* Mazur Minodora, M.D., Ph.D., Professor, State Medical and Pharmaceutical University "Nicolae Testemițanu", Chisinau, Republic of Moldova

**Introduction:** In osteoarthritis pain and physical function are the main outcome measures, and self-report questionnaires are the preferent assessment method. This is evidence suggesting that self-reports of physical function represents what people experience while performing activities rather than their ability to perform activities.

**Objective:** To study reliability characteristics for global assessments and compared test reliability of both PGA, MDGA vs. WOMAC in knee osteoarthritis.

**Methods:** Patients that were at least 40 years old and had experienced clinical symptoms of OA in the knee at least 3 months before inclusion into study were eligible for inclusion in this trial. All patients were required to fulfill the American College of Rheumatology classification criteria for OA in the knee. The