

evaluated during the early post-stroke recovery (at 4-6 months distance from the ischemic stroke) with 52,5 points, which can be explained by the presence of TIAs in the past of 2 patients from this subgroup and who accumulate a high Barthel score – 72,5 points.

Conclusions: TIAs can be considered as factors that induce cerebral ischemic preconditioning. The assessment of disability degree in patients with ischemic stroke using the Barthel score showed a significantly higher mean score in patients with stroke and TIA than in patients without TIA in the past. The highest Barthel score was obtained in patients evaluated in the early recovery period and in patients with TIA at 12 months before stroke.

Keywords: stroke, transient ischemic attacks, cerebral ischemic preconditioning, Barthel score.

INDICATORS OF DIABETES MELLITUS TYPE 2 PATIENTS COMPENSATION BY THE LEVEL OF GLYCATED HEMOGLOBIN IN TERNOPOL REGION, UKRAINE, 2011

Pasyechko N., Mazur L., Naumova L., Smachylo I., Bob A., Chernukhina O.

State Medical University „I.Ya. Horbachevsky”, Ternopol, Ukraine

Introduction: WHO notes that diabetes mellitus (DM) leads to increased mortality of patients by 2-3 times and reduces their life duration by 10-30 %. Epidemiological studies in Ukraine indicate a permanent increase in the number of patients with both DM types. The most objective and long-term indicator of diabetes compensation is glycated hemoglobin (HbA1c).

Purpose: Our study was to estimate the stage of compensation for patients with DM types 1 and 2 in Ternopol region on the basis of HbA1c levels.

Materials and methods: We examined 285 patients with type 2 diabetes, among them 150 people received insulin therapy. The duration of diabetes was from 2 to 17 years. Patients' age was from 42 to 75 years. Due to the fact that the study involved 49.2% of patients older than 50 years, stages of compensation of diabetes were the following: HbA1c less than 7.0% - good control, 7,0-8,0% - satisfactory control, above 8.0% - poor control.

Results: The amount of patients with HbA1c level under 7% was 8.65%, with HbA1c from 7.0 to 8.0% - 17.11%, with HbA1c above 8.0% - 74.24%, respectively. The average HbA1c level among clients with type 2 diabetes and insulin treatment was $(9.62 \pm 0.07)\%$ and among those, who used anti-diabetic drugs - $(9.34 \pm 0.08)\%$, respectively.

The average HbA1c concentration in patients with type 2 DM in Ternopol region, Ukraine in 2011 was $(9.48 \pm 0.06)\%$.

Conclusions: The average level of glycated hemoglobin in patients with type 2 diabetes mellitus in Ternopol region, Ukraine in 2011 was $(9.48 \pm 0.06)\%$, and did not depend on the method of its treatment (insulin or anti-diabetic drugs). The majority of clients with diabetes mellitus type 2 (74.24%) presented poor control of the disease.

Key words: Diabetes Mellitus, glycated haemoglobin.