CLINICAL AND PARACLINICAL CHARACTERISTICS IN PATIENTS WITH PULMONARY THROMBOEMBOLISM

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Background. Deep vein thrombosis is the most common cause of acute cor pulmonale and pulmonary thromboembolism that is a life -threatening situation. **Objective of the study.** The objective of this study was to investigate the clinical presentation, diagnostic findings and treatment of a 59-year-old male patient. **Material and methods.** The case was examined clinically and investigated using complete blood count, D-dimer test, chest x ray imaging and echocardiography. **Results.** Patient age 59 years old male, weight 130kg, height 160cm, BMI of 50.8 obese, clinical presentation revealed deep vein thrombosis with presence of eggs edema, hypertension of grade 2 (160/100), SpO2 was 96% and temperature - 36.6°C. Erythrocyte count 3.46 low, mean erythrocyte volume 118.2 elevated, mean erythrocyte hemoglobin 39.6, platelets count 159 low, width of the red blood cell 87.6 elevated, with of the distribution curve and the mean cell 20.1 elevated, immature granulocytes 0.3 elevated, also increase D-Dimer. On chest x ray imaging he had triangle pulmonary infiltrate. Echocardiography study showed signs of pulmonary hypertension, considerable dilatation of the right cavities, moderate concentric left ventricular hypertrophy and preserved left ventricular systolic function - 53%. The treatment included anticoagulants, vasodilators, antibiotics and antiplatelets. **Conclusion.** The case study highlights the clinical and diagnostic manifestation of deep vein thrombosis in a 59-year-old male patient with pulmonary thromboembolism diagnosis, where proper treatment is required. **Keyword:** Deep vein thrombosis, pulmonary thromboembolism.

ASSESSMENT OF COGNITIVE IMPAIRMENT IN ELDERLY WITH FRAILTY SYNDROME

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Background. 'Cognitive impairment' and 'frailty' are the most prevalent geriatric syndromes that coexist in older adults imposing significant financial burdens on healthcare systems. Progressive age-related cumulative changes are reflected by increased dependency, vulnerability, disability, and mortality. **Objective of the study.** To evaluate cognitive impairment and research factors that can accelerate or delay aging related health and prognosis. **Material and methods.** The pathophysiology, association roles, and screening techniques were reviewed using selected 60 PUBMED database's 2018–2023 papers. **Results.** Frailty and related cognitive impairment were shown to be significantly correlated. Numerous aggravating factors including physiological (lower hormone functions, senescence of all organ systems), genetic, environmental, physical (comorbidities, polypharmacy), and mental pathologies (psychosocial and emotional) were identified. **Conclusions.** Reliable early indicators and screening algorithms are crucial. A recent brief community screening approach combines self-administered tools like p-AD8 + IQCODE questionnaires for primary and DemTect + MoCA test for secondary evaluation. The implementation of simple preventive measures like including mobility, strength and resistance training, proper nutrition, adequate management of comorbidities, active participation in more social, and cognitive activities that can delay progression is critical. Avoiding polypharmacy and adequate treatment of comorbidities can improve cognitive status in elderly. **Keywords:** frailty, cognitive impairment, risk factors.