

Introduction. Gout is a complex disease characterized by hereditary or acquired disorder of purine metabolism and uric acid excretion. It is characterized by hyperuricemia, recurrent arthritis attacks in which the synovial fluid contains monosodium urate crystals and formation of tofy (monosodic urethane monohydrate deposits), especially around the extremities of joints.

Aim of the study. Determining the lesion of key organs in gout; correlation analysis of clinical and biochemical indices in patients with gout.

Materials and methods. A retrospective study was carried out on patients hospitalized in the rheumatology and arthrology department of the Public Health Care Institution of the Republican Clinical Hospital in the period 2016-2017 diagnosed with gout according to ACR criteria. In the number of 45 patients all were male. The study was performed by laboratory analysis (uric acid in the blood, lipidogram, uric acid in the urine, glycemia) and by instrumental method (radiological examination).

Results. It was found that the first symptoms of gout appeared after the age of 45, in the presence of risk factors like hypertension, obesity, diuretic use. The presence of renal impairment (68% nephrolithiasis), cardiovascular disorder (88% arterial hypertension) and the presence of endocrine pathology (DZ 75%) was determined in the case of internal pathologies. As a basic treatment it was found that 71% of patients are currently taking allopurinol and 29% of patients are treated with adenuric.

Conclusions. Lesion of key organs was determined in gout. After correlation analysis of clinical and biochemical indices in patients I have found correlation between the level of uric acid and triglycerides, the level of uric acid and ABP values, uric acid and degree of obesity, uric acid and glycemia.

Key words: gout, kidney, risk factors, treatment

118. STUDYING PECULIARITIES OF CHRONIC KIDNEY DISEASE IN PATIENTS WITH CONCOMITANT OBESITY

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Introduction. Recently, much attention is paid to the study of obesity and overweight influence on the forecast of chronic kidney disease. The negative impact of overweight on renal function is still poorly understood.

Aim of the study. To explore the features of the course of chronic kidney disease in patients with and without concomitant obesity.

Materials and methods. The study involved 48 patients with stage 2 chronic kidney disease (CKD), who were hospitalized in the Nephrology department of Chernivtsi regional clinical hospital. The average age of the patients was 43.5 ± 1.5 years (from 34 to 62 years). CKD was caused by: chronic pyelonephritis in 19 patients (39.5%), chronic glomerulonephritis in 12 patients (25%), diabetic nephropathy in 17 patients (35.5%). CKD duration ranged from 1 to 17 years (on average $8,9 \pm 1,5$ years). All patients were divided into three groups.

Results. An analysis of renal function in the evaluation of patients with the second degree CKD and without concomitant obesity as compared with the healthy subjects showed the presence of proteinuria and deterioration of glomerular filtration rate ($p < 0.05$) While studying the blood lipid spectrum indices, we identified impaired lipid serum metabolism as a reliable increase in levels of TC, triglycerides and LDL cholesterol due to lower HDL-C in patients with CKD and without obesity compared with healthy individuals ($p < 0.05$)

Conclusions. The analysis of clinical and laboratory parameters revealed the presence of an imbalance in fat metabolism in obese and non-obese patients with chronic kidney disease.

However, the changes in patients with II degree obesity were more significant. In this same group the patients showed a more pronounced impairment of renal function, indicating a more severe course of disease in obese patients. It means that this variant of the disease is more unfavorable.

Key words: chronic kidney disease, obesity, hyperlipidemia, lipids

119. LIPID PROFILE CHARACTERISTIC IN PATIENTS WITH DIABETIC NEPHROPATHY III-IV STAGES ACCORDING TO AGE AND SEX

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Introduction. Diabetic nephropathy (DN) is one of the most serious microvascular complications of diabetes mellitus (DM).

Aim of the study. To examine age and gender characteristics of lipid imbalance in blood of patients with DN III-IV stage.

Material and methods. 34 patients with diabetes type 2 diabetes aged 40 to 65 years, with disease duration of 10 - 15 years, were under observation under. All the patients divided into two groups: 13 patients with DN III st. were included to group 1. 11 patients with DN IV st.- in 2 groups. The control group were 15 healthy individuals. Patients in all groups were divided regarding to their age and gender. All the patients under study were tested for total cholesterol, triglycerides, HDL cholesterol, LDL cholesterol.

Results. Analysis of clinical and laboratory parameters of patients studied showed lipid metabolism serum as a probable increase in levels of total cholesterol, triglycerides and LDL cholesterol against decrease in HDL-C compared with results of healthy individuals ($p < 0.05$). Moreover, the most pronounced imbalance of lipid metabolism was found in patients who had stage IV DN ($p < 0.05$). Gender distribution in the groups of patients showed that more pronounced lipid imbalance was in women than in men. It should be noted that the significant increase in LDL cholesterol was observed in both men and women of DN IV st. ($P < 0.05$). Thus, a significant imbalance of lipids in patients with DN III - IVst. was present in all patients with probable gender difference, especially with DN IV st. According to the age group studied patients were divided into two age groups: group I - patients adulthood (45-65 years) and group II, patients with DN elderly over 65 years. Analysis of the data revealed that lipid metabolism most significantly deviated in persons of mature age compared with older patients ($p < 0.05$) and depended on the stage of DN.

Conclusions. There were significant gender differences in lipid imbalance in patients with DN III-IV stages of its predominant in women. Lipid imbalance is most pronounced in adulthood patients with DN III-IV st., manifested by a significant increase in the level of LDL ($p < 0.05$). Detected probable increasing triglycerides in older patients with DN stage IV compared with those of patients of mature age ($p < 0.05$).

Key words: chronic kidney disease, obesity, hyperlipidemia, lipids

120. CHARACTERISTIC OF THE LIPID PROFILE IN PATIENTS WITH DIABETIC NEPHROPATHY III-IV STAGES

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