

Purpose and objectives: to determine the intraceptive disorders in patients diagnosed with depression.

Materials and methods: Beck questionnaire that highlights the affective state of the subject at the time of interrogation. The Spielberger test to assess the general and momentary state. VMP-2 (Vegetative Motor Profile) – to stand out the motor and vegetative disorders caused by depression.

Subjects: the tests were used on 2 groups, the study group (20 patients diagnosed with depression) and the control group (392 students from the State Medical and Pharmaceutical University “Nicolae Testemitanu”).

Results: the prevalence of depression after Beck and Spielberger equalizes to 100 %. The control group measures 49,5% of subjects with depression (using the Beck scale) and 58 % of subjects with a high level of anxiety (using the Spielberger test). From the medical point of view, there is an influence of depression on the quality of life, but without a linear correlation.

Conclusion: according to the performed study, a high prevalence, in patients with depression, has the next disorders: headaches, insomnia, vertigo, syncope, weight loss, anxiety, fatigue, gastrointestinal disorders.

Keywords: Depression, Beck, Spielberger, PVM-2, disorder.

DYSLIPIDEMIA AND HYPERGLYCEMIA IN HYPERTENSIVE PATIENTS WITH METABOLIC SYNDROME

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Introduction: Metabolic syndrome (MS) is a combination of interrelated risk factors, which include: dyslipidemia (DLP), hyperglycemia, high blood pressure, and abdominal obesity. This coexistence of metabolic disorders promotes atherosclerotic cardiovascular disease, being also a causative factor for type 2 diabetes mellitus (DM). Hypertension is one of the most common manifestations of MS, which has a high prevalence worldwide (25-35% in adults and 60-70% in people over 70 years) due to the global epidemic of DM and obesity. Another association of hypertension and MS is DLP, induced by the action of insulin on lipid metabolism, which increases very low density lipoprotein synthesis in the liver.

Methods: It was a retrospective study of patients from the Institute of Cardiology, the key criterion being grade I-II hypertension. Diagnosis of MS was established according to criteria proposed by NCEP/ATP III in 2005. MS was considered in patients having at least 3 of 5 criteria. DM was established according to American Diabetes Association definition in 2003.

Results: There were 168 hypertensive patients included of which we selected 114 patients with grade I-II hypertension divided subsequently into four groups: with MS and DM (n=32); with MS, but no DM (n=29); no MS and no DM (n=37); no MS, but with DM (n=16). Following evaluation in these groups included determination of lipid and glucose metabolism features.

Patients with MS only had significantly higher TG levels than patients with DM only (2.23 ± 0.04 vs. 1.30 ± 0.06 mmol/l, respectively). Similarly, values of TC and LDL-C were highest in patients with MS only (5.80 ± 0.04 and 4.71 ± 0.03 mmol/l, respectively). Serum levels of HDL-C had shown inverse correlations compared with TG. Calculating the atherogenic coefficient revealed that TC/HDL-C ratio is significantly higher in MS groups compared to non-MS groups, independently of the presence of DM.

Evaluation of glucose metabolism in the study group revealed that 45 (39.5%) patients were diagnosed with type 2 diabetes and 69 (60.51%) patients were nondiabetic, of which 38 (33.3%) patients with

impaired glucose homeostasis (IGH) and 31 (27.2%) patients with normal glucose regulation (NGR). Group assessment found that IGH meets in higher proportion among nondiabetic patients with MS (84.4%), than among nondiabetic patients without MS (29.7%).

Conclusions: Lipid metabolism disorders is more common in the group of hypertensive patients with MS, and were not altered by the presence of DM. DLP was mainly manifested by a significant reduction in HDL-C, high levels of TG, TC and LDL-C and increased TC/HDL-C ratio, which implies a more enhanced atherogenic activity in groups of patients with MS.

Glucose metabolism disorders are common in 72.8% of hypertensive patients and only 27.2% of them have normal glucose regulation. Comparison of nondiabetic groups revealed that IGH meets in higher proportion among nondiabetic patients with MS, than among nondiabetic patients without MS. Thus, hyperglycemia is highly associated with hypertension, particularly in patients with MS.

Keywords: Hypertension, metabolic syndrome, type 2 diabetes mellitus, DLP, hyperglycemia.

EPLERENONE IN PATIENTS WITH ACUTE MYOCARDIAL INFARCTION

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Introduction: Heart failure is a frequent complication after acute myocardial infarction and has a poor prognosis. The increasing of heart failure is about 1-2% per year. 50% of patients with heart failure after acute myocardial infarction, usually, live no more than 5 years.

The **purpose** of our research was to estimate treatment efficiency in patients with myocardial infarction which is complicated by heart failure, with using of the antagonist of aldosterone eplerenone on parameters of lipid and protein peroxidation.

Material and methods: We have investigated 37 patients (33 men and 4 women) with acute myocardial infarction in age from 39 to 68 years. A diagnosis was made according to the standards of European organization of cardiologists. All patients were divided into two groups.

The first group included 14 patients, who were prescribed standard therapy with verospiron in the dose 25 mg/day during 10 days, the second one – 13 patients who has got standard therapy with eplerenone in the dose 25 mg/day during 10 days. Control group included 10 patients healthy volunteers. We have measured concentration of malone aldehyde and oxidative modification of proteins.

Results: We have found an increasing of lipid and protein peroxidation processes in both groups before treatment. The parameters of malone aldehyde and oxidative modification of proteins were significantly higher than in control group. Differences in the indices of both groups were statistically not reliable.

Standard treatment led to diminishing of peroxidation processes– the patients of the first group had decreased indices of malone aldehyde and oxidative modification of proteins, however these indices were higher than in control group. The results of the second group were more expressed.

Conclusions: The conducted research testify that the using of the antagonist of aldosterone eplerenone in a complex treatment of patients with acute myocardial infarction, which is complicated by heart failure, lead to decreasing of processes of lipid and protein peroxidation.

Key words: myocardial infarction, heart failure, eplerenone, peroxidation.