

Materials and methods: The objects of research are laboratory animals (rats) of both sexes at the age of 6-7 weeks. Group 1 - rats with simulated asthma; group 2 - animals with a simulated asthma and "treated" glucocorticosteroid (GCS), dexamethasone; group 3 - the control group (nonallergic);

Results: In the process, an experimental simulation of asthma in animals, assessment of clinical signs allergization ovalbumin, and immunocytochemical study of preparations of bodies of animals and spectrofluorimetric research of preparations of animal bodies were carried out. The study obtained a model of bronchial asthma in rats, confirmed clinically, and found that: the expression of CD38 was higher in group 1 rats; the activity of CD38 in experimental models of asthma is the highest at the site of localization of the inflammatory process, i.e. in the lungs; revealed a positive correlation relationship ($r = 0,720894$) between the activity of ADP-ribozilcikliazy in the tissues of lung and spleen in the first group of animals suggests that the activity of CD38 is increased in asthma, not only in the lungs, but also in the spleen; the level of Pgp expression did not differ in rats with simulated asthma and control groups.

Conclusions: It would be desirable to notice that now already there are modulators of activity in both expression of Pgp and CD38 which demand the further studying and in the future could be used for treatment BA.

Keywords: bronchial asthma, P-glycoprotein, CD38, steroid dependence, steroid-sensitive.

PERIPARTUM CARDIOMYOPATHY: CASE REPORT

Chiosa Oxana

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

Introduction: Peripartum cardiomyopathy (PPCM) is a disease of uncertain etiology, characterized by left ventricular systolic dysfunction and symptoms of heart failure, which occur in previously healthy women mainly during the end of pregnancy and the first 5 months after delivery. The incidence of PPCM is around 1 in 2500–4000 in the USA, 1 in 1000 in South Africa, and 1 in 300 in Haiti. Risk factors for PPCM include multiparity, advanced maternal age, twin pregnancy, Afro-American race etc. The precise cause and mechanism of PPCM remains unknown, but numerous hypotheses have been proposed (myocarditis, abnormal immune response to pregnancy, abnormal response to the hemodynamic stress of pregnancy, excessive prolactin production etc). The excessive prolactin production hypothesis represents a first potential disease-specific pathophysiological mechanism which offered bromocriptine as a potential novel therapeutic agent for treatment of PPCM patients.

Purpose: Revealing the importance of early diagnosis and initiation of adequate treatment in patients with PPCM.

Objectives:

- Study of the incidence, risk factors, possible causes of PPCM;
- Study of the clinical picture, evolution, new treatment strategies, prognosis of PPCM.

Material and methods: literature review, data of various studies, retrospective analysis of patient's chart and treatment sheet.

Results: A 44-year-old woman was admitted to the department of Cardiology with following complaints: dyspnoea, chest discomfort, heart palpitation. Complaints of dyspnoea, persistent cough and fatigue appeared about 3 years ago after Cesarean delivery of the second baby. Her treatment was not adequate about 2 years. She gave no history of any cardiac problems before. On examination, she was

pale, slightly icteric, with nasolabial triangle cyanosis. There was oedema of low extremities. Her BP was 100/70 mm Hg, HR- 98 b/min, irregularly!! irregular. The cardiac auscultation showed gallop rhythm, significant cardiac murmurs. ECG: sinus tachycardia interrupted by polymorphic ventricular extrasistoles. Chest X-ray: venous stasis and increase in cardiac silhouette. Echo-CG showed dilatation of all chambers, ejection fraction-33%, there was mitral and tricuspid regurgitation (IV degree), severe pulmonary hypertension-75-80 mmHg. The laboratory investigations: increased liver tests. The final diagnosis was proposed: Postpartum cardiomyopathy. The patient was treated with diuretics, β -blockers and ACEIetc.

Conclusion: Peripartum cardiomyopathy is a relatively rare but a life-threatening form of heart failure. Heightened suspicion is important when a pregnant woman presents with signs of heart failure, because early diagnosis allows proven treatment to be started. Standard heart failure therapy should be started in postpartum patients with this disease, using available local protocols.

Keywords: peripartum cardiomyopathy, prolactin, treatment.

RHYTHMOCARDIOGRAPHY USED TO STUDY THE IMPACT OF VALIDOL AND NITROGLYCERIN ON HEART RATE VARIABILITY AMONG PATIENTS WITH STABLE STENOCARDIA

Chernyaev M.

Academic adviser: Safronova E., M.D., Ph.D., Associate Professor, Chelyabinsk State Medical Academy, Chelyabinsk, Russian Federation

Introduction: One of the main reasons of frequent able-bodied citizens' mortality is ischemic heart disease. Nitroglycerin is used for the reduction of stenocardia attacks, but in case of intolerance of the medication or if side effects appear, it may be substituted for validol. Nowadays peripheral vegetotropic effects of these medications are not completely studied, thus the research that is being carried out is of great topicality.

Aims: The present research is aimed at studying the way nitroglycerin and validol affect heart rate variability among patients with stable stenocardia.

In the research were included 32 patients with stable stenocardia of I (16%) %, II (56%) and III (28%) dynamic classes from the Cardiology department of outpatient clinic №8 (Chelyabinsk, Russia). The average age of the group is $54 \pm 6,2$ years. Rhythmocardiography was realized on apparatus-program complex "Micor" (Russia) of high resolution in order to study heart rate variability. Rhythmocardiography was carried out 2 minutes before and 2 minutes after sublingual nitroglycerin intake and on the other day 10 minutes before and 10 minutes after sublingual validol intake. Heart rate variability was studied initially in lying position (ph) and also in 4 stimulating probes: Vm- Modified Valsalva Maneuver, pA-Ashner-Danjiny Test, AOP -Active Orthostatic Test, PWC₁₂₀ -Loading Test Power Working Capacity simultaneously measured with EKG in real-time. Following findings were determined: RR - beat-to-beat

interval; SDNN - Standard Deviation of Normal-to-Normal Intervals of sinus heart rate HR; ARA -Amplitude respiratory arrhythmia; separately were defined: quadratic dispersion of humoral-metabolic HR deflections (σ_l), sympathetic HR deflections (σ_m), parasympathetic fluctuations (σ_s) and their spectral analogues for determination of control factors' correlation in constitutional deflection spectrum BCP -VLF%, LF%, HF%. Statistics were elaborated with the help of StatPlus® program (2009).

Results: It was proved from the realized research that with validol and nitroglycerin intake the total heart rate variability (SDNN) significantly increased in all probes. With nitroglycerin intake in com-