0.17, p <0.01), which is an indicator of inflammatory activity of the endothelium. The level of antioxidant CP had an inverse correlation with CD32 CD40 (r = -0.392, p <0.05), with the blood flow rate in v.p. (r = -0.403, p <0.05) and with a blood flow rate in v.h. (r = -0.363, p <0.05).

Conclusion. Thus, both in fatty infiltration of the liver and in atherosclerotic vascular lesions, an important role belongs to CSI and its main factor of NF-kB. CSI promotes endothelial dysfunction, which is also manifested in the increased blood flow rate in v.p. and v.h. and increased marker of inflammatory activation of the endothelium CD40 CD40. The high level of CP determines the degree of antioxidant protection and has an endothelial protective effect in this category of patients.

Prospects for further research. Further study of the dynamics of the CSI markers and endothelial dysfunction can be used to develop effective pathogenetically validated therapeutic regimens for patients with CHD and NAFLD.

It is expedient to use the assessment of the level of expression of IkBa as a marker of the inflammatory process activation in CHD, steatohepatosis and atherosclerosis of vessels. It is also recommended to assess the level of CP in the blood as an indicator of endothelial protection in these diseases.

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Key words: coronary heart disease, chronic systemic inflammation, endothelial dysfunction, non-alcoholic fatty liver disease, atherosclerosis, circulating endothelial microparticles, blood flow rate in the portal and hepatic veins.

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THE INFLUENCE OF CILOSTAZOL ON CLINICAL-HEMODYNAMIC AND RELATED HUMORAL FACTORS IN PATIENTS WITH COMPLICATED ARTERIAL HYPERTENSION

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Arterial hypertension (AG) is one of the main risk factors for myocardial infarction or stroke, the number of such patients is growing annually. The search for new methods of diagnosis and treatment of this pathology will partially improve this situation. The level of endogenous bioregulators (beta-endorphine, serotonin, dopamine, orphanine, angiotensin) has a special significance in the genesis of cerebral blood supply disorders. One of the drugs that are effectively used in patients with atherosclerotic peripheral vascular disease is cilostazol

Materials and Methods. This study enrolled 31 patients with arterial hypertension, among them the group I consisted of 19 patients with hypertension without complications, group II - 12 patients with complicated course of hypertension, intermittent claudication, combined with concomitant pathology, history of acute myocardial infarction or history of stroke. The control group consisted of 16 relatively healthy individuals. The average age of patients was 64.3 ± 9.7 years old, male. Plasma levels of antibodies to endogenous bioregulators were determined by ELISA.

Results. Our results revealed that in the group II of patients with severe hypertension, who had a significant (p <0.05) low beta-endorphin level (0.22 ± 0.06) compared with the group I (0.59 ± 0.15) and significant (p <0.05) high serotonin (1.95 ± 0.71) and dopamine (2.02 ± 0.55) levels. After the use of cilostazole within 24 days in a dose of 50 mg 2 times a day, it leads to improved exercise tolerance, increase the distance of painless walking and an increase in...
the level of β-endorphin to normal values, which correspond to the group of control and a moderate decrease in serotonin and dopamine levels by 28.7% and 31.6% in accordance.

Prospects for further research. Our studies show improving the condition of patients under the influence of cilostazol, increasing the distance of painless walking, improving the psycho-emotional state, approximation to normal values of endogenous bioregulators.

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EVOLUTION OF sCD14 BIOMARKER IN INTRAABDOMINAL HYPERTENSION IN PATIENTS WITH ACUTE SURGICAL DISEASES

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One of the causes of death in the development of abdominal compartment syndrome is the translocation of microorganisms according to the progression of sepsis. The known biomarker sCD14 is an early highly specific marker of sepsis, appearing before manifestation and clinical symptoms of them.

Materials and Methods. The study includes 100 patients with acute abdominal surgical diseases, aged from 20 to 80 years. In the structure of the diseases: acute appendicitis 16 (16%), acute intestinal obstruction 37 (37%), pancreonecrosis 5 (5%), perforated ulcer 22 (22%), acute cholecystitis (mechanical jaundice) 15 (15%) patients, varicose veins of the lower extremities (control group) 5 (5%) patients. The determination of sCD14 in blood plasma was performed using the BioRad ELISA robotic system Evolis.

Results. The average concentration of the sCD14 biomarker in the control group (healthy individuals) is 413.91 ng/ml; intra-abdominal hypertension (IAH) 5-15 mm Hg. (group 2) does not cause statistically significant changes in the concentration of sCD14 compared to the control group; IAH 16-25 mm Hg. (group 3) causes an increase in the concentration of the sCD14 biomarker compared to the normal values by 14% (there are statistically significant differences compared to the control group and group 2), which confirms the previous experimental studies on the onset of enterogenic transfer of bacterial flora into the bloodstream at this level of the IAH; At the IAH 26-35 and more mm Hg. (group 4) there is a sharp jump in the concentration of sCD14 almost in half, which probably indicates the development of a “preseptic” state, followed by the development of a septic state. The increase in intraabdominal pressure causes a statistically significant increase in the content of the prescriptive state marker sCD14 at all degrees of intra-abdominal hypertension 1.2 times as compared with the control (p <0.01); the duration of intra-abdominal hypertension from 12 to 24 hours causes a statistically significant increase in the concentration of sCD14 (p <0.01) with any figures of intra-abdominal pressure.

Prospects for further studies: with intra-abdominal hypertension, the significance and specificity of the marker for the translocation of bacterial flora to the bloodstream of sCD14 is established, and a D-dimer thrombolysis marker is planned.

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