

МІНІСТЕРСТВО ОСВІТИ І НАУКИ УКРАЇНИ  
МИНИСТЕРСТВО ОБРАЗОВАНИЯ И НАУКИ УКРАИНЫ  
MINISTRY OF EDUCATION AND SCIENCE OF UKRAINE

ХАРКІВСЬКИЙ НАЦІОНАЛЬНИЙ УНІВЕРСИТЕТ ІМЕНІ В. Н. КАРАЗИНА  
ХАРЬКОВСКИЙ НАЦИОНАЛЬНЫЙ УНИВЕРСИТЕТ ИМЕНИ В. Н. КАРАЗИНА  
V. N. KARAZIN KHARKIV NATIONAL UNIVERSITY

XIV Міжнародна наукова конференція студентів, аспірантів,  
докторантів, молодих вчених та фахівців

**АКТУАЛЬНІ ПИТАННЯ  
СУЧАСНОЇ МЕДИЦИНИ**

ТЕЗИ ДОПОВІДЕЙ  
(30–31 березня 2017 року, м. Харків, Україна)

У 2 томах

Том 1

XIV Международная научная конференция студентов, аспирантов,  
докторантов, молодых учёных и специалистов

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14<sup>th</sup> International Scientific Conference of Students, Graduate students,  
Doctoral candidates, Young scientists and Specialists

**TOPICAL ISSUES  
OF MODERN MEDICINE**

ABSTRACTS BOOK OF THE CONFERENCE  
(March 30–31, 2017, Kharkiv, Ukraine)

In 2 Volumes

Volume 1

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in those with adult-onset schizophrenia. This possibility and the reasons for it need further investigation.

As you can see Early-onset schizophrenia (childhood-onset schizophrenia) is quite a challenging condition. While adult onset schizophrenia (AOS) has been studied in great detail for many decades, research on Early-onset schizophrenia is still more limited. This way this disorder requires more researches and trials development, improvement in diagnostics, psychoeducation and treatment processes.

## **TYPES OF ORTHOSTATIC REACTIONS OF SYSTOLIC BLOOD PRESSURE IN HEALTHY VOLUNTEERS**

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**Objective:** To study the incidence of different types of orthostatic reactions (OR) depending from changes of systolic blood pressure (SBP) during the active standing test (AST) in healthy volunteers to develop proposals to improve diagnostic efficiency. AST, as a way to influence on the venous return of blood to the heart, allows us to study the compensatory hemodynamic and autonomic changes, and thus judge the function of the circulatory system.

**Materials and Methods:** On the polyclinic № 24 examined 63 healthy volunteers (51 men and 12 women), aged (23,  $7 \pm 3$ , 9) years. We take into account the raw data of blood pressure. The study was conducted in the morning, 24 hours before it was limited to the use of coffee, alcohol, medication, and after 30 minutes physical activity. Blood pressure was measured by the method of Korotkov by tonometer Microlife BP AG120 in a lying position after 5 minutes of rest, and after 3 minutes after the transition to a standing position. As a result of measurement of SBP in the AST in the supine position and in the third minute after a transition from a lying position to a standing position healthy volunteers are assigned to one of three types of orthostatic reactions SBP: Type 1 - hypertonic (increase SBP by more than 5%); Type 2 - isotonic (SBP changes within  $\pm 5\%$ ); Type 3 - hypotonic (SBP decrease by 5% or more). For statistical evaluation used parametric criteria (mean - M and the standard deviation - sd).

**Results:** In the transition from a lying position to a standing position in 38% of healthy volunteers had an increase SBP in 48% of healthy volunteers did not change systolic and 14% of healthy volunteers had reductions in SBP. Hypertonic type reaction SBP in women (50%) is more common than in men (31%). Hypotonic type is less common in men (14%), there is less likely than women (8%). Isotonic common type in men (55%) is more likely than women (42%).

Tab №1

**Distribution of healthy volunteers into groups OR SBP considering factors age and gender (% ,  $M \pm sd$ ):**

Indicators		Types of orthostatic reactions		
		Hypertonic	Isotonic	Hypotonic
Total		14%	48%	38%
Age		23,7 $\pm$ 3,8	23,8 $\pm$ 9,7	23 $\pm$ 9,6
Gender	Men	14%	55%	31%
	Women	8%	42%	50%

Conclusions: These data indicate the prospects of AST in the diagnosis of cardiovascular diseases, based on a study of the average values of parameters in healthy volunteers. There are three types of OR in healthy volunteers: hypertonic - (14%), isotonic - (48%), hypotonic - (38%). Changes in body position can have marked effects on the circulatory system. These reactions are designed to maintain a certain level of systolic blood pressure in the changed circumstances. This indicates the possibility of widespread use AST for the diagnosis of the regulation of the cardiovascular system.

## ACTUAL COURSE OF SYSTEMIC LUPUS ERYTHEMATOSUS IN CHILDREN

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Introduction: Systemic lupus erythematosus (SLE) is a rheumatic disease characterized by autoantibodies directed against self-antigens, immune complex formation, and immune dysregulation, resulting in damage to essentially any organ. The use of corticosteroid therapy in the 1950s resulted in improvement in 5-year survival from 5% to 70%. Mortality rates rise over time, with the major causes of death being infection, nephritis, central nervous system disease, pulmonary hemorrhage, and myocardial infarction. Early diagnosis and treatment can decrease mortality rates.

Aim: The goal of our research was to determine the actual course of SLE in children.

Methods: The study involved 12 children with SLE aged from 7 to 18 years. There were 1 male and 11 females with disease duration from 7 month to 11 years. Half of them had anamnesis of disease more than 5 years. Assessment of children were based on physical and laboratory examination, which included clinical, biochemical, immunological analysis of blood, instrumental tests, such as electrocardi-