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**XVI МІЖНАРОДНА НАУКОВА КОНФЕРЕНЦІЯ  
СТУДЕНТІВ, МОЛОДИХ ВЧЕНИХ ТА ФАХІВЦІВ**

# **АКТУАЛЬНІ ПИТАННЯ СУЧАСНОЇ МЕДИЦИНИ**

**Тези  
доповідей**

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до 25-річчя від дня відродження кафедр  
внутрішньої медицини, хірургічних хвороб,  
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radial artery and the calculation of the vegetative Kerdo index (VIK). The main group was divided into two subgroups depending on the pathology of the myocardium. The first subgroup consisted of 30 patients with undifferentiated systemic connective tissue dysplasia (USCTD) with the presence of mitral valve prolapse of varying severity, mostly I degree without regurgitation. The second subgroup includes 32 patients with various rhythm and conduction disturbances (RCD).

**Results.** When calculating the heart rate, significantly high rates were obtained in both the first and second study groups compared with the results of adolescents of the control group ( $80.00 \pm 3.58$  beats/min,  $p < 0.05$  in adolescents with USCTD;  $86.72 \pm 2, 89$ ,  $p < 0.001$  in adolescents of the group with RCD versus  $73.70 \pm 1.75$  in adolescents in the control group). With vegetative balance in the regulation of the cardiovascular system, the VIK tended to 0. In adolescents of the studied groups, the Kerdo index had a negative value both in the subgroup with USCTD and in the subgroup with RCD, but in adolescents with arrhythmias it was significantly higher compared with adolescents from control groups ( $- 84.26 \pm 3.48$  in adolescents with USCTD;  $- 77.12 \pm 3.27$ ,  $p < 0.05$  in adolescents with RCD versus  $- 91.41 \pm 3.68$  in adolescents in the control group). This level of VIK indicates activation of the parasympathetic division of the VNS in the studied adolescents.

**Conclusion.** Thus, in patients with non-inflammatory heart diseases, the parasympathetic division of the vegetative nervous system is activated, which indicates a more favorable, anabolic variant of the shift and a more economical mode of functioning of the body systems.

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**THE QUALITY OF LIFE OF PATIENTS WITH A SICK SINUS SYNDROME  
DEPENDING ON THE PULSE BLOOD PRESSURE LEVEL ONE YEAR AFTER  
CARDIAC PACEMAKER IMPLANTATION**

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**Introduction.** Sick sinus syndrome (SSS) is the most common arrhythmogenic disease that requires the implantation of cardiac pacemaker (CP). However, the relationship of comorbid conditions and quality of life (QoL) with the level of pulse blood pressure (PBP) in these patients has not yet been studied.

**The aim of the study.** To evaluate the relationship of QoL and comorbid conditions of patients with SSS depending on the level of PBP one year after the implantation of CP and pharmaceutical therapy.

**Materials and methods.** One year after the implantation in the DDD (R) mode, 15 men and 25 women with SSS were examined. The average age was  $63 \pm 7$  years. Patients were divided into two groups: group A with normal PBP - 40–60 mm Hg, group B with a high PBP more than 60 mm Hg. The frequency of occurrence of forms of chronic ischemic heart disease (CIHD), degrees of arterial hypertension (AH), forms of atrial fibrillation (AF), functional classes (FC) of chronic heart

failure (CHF) were assessed. In the study of patients' QoL, the physical component of health (PF - physical functioning, PR- physical function role, BP - body pain, GH - general health) and the psychological components of health (VT - vitality, SF - social functioning, ER - emotional role, MH - mental health) were studied according to a short version of the general health questionnaire MOS-SF-36. Pharmaceutical therapy was provided and it included renin-angiotensin-aldosterone system inhibitors, diuretics, antiarrhythmics, antithrombotic drugs and oral anticoagulants. The statistical processing was carried out using Microsoft Excel. The significance of the differences between the groups was determined using Mann-Whitney U-test. The expected result was determined by the confidence level  $p < 0.05$ .

**Results.** Patients with SSS at the annual checkup after the implantation of CP were mostly concentrated in the group with normal PBP (62.5%). In group A, postinfarction cardiosclerosis (PICS) (33%), stable angina II FC (24%), AH 1st degree (40%), CHF I FC (36%) and persistent form of AF (28%) were the most common; in group B - PICS (60%), stable angina III FC (40%), AH 2nd degree (67%), CHF II FC (87%) and persistent form of AF (33%). A decrease in the level of QoL in group A and to a greater degree in group B was found. However, the greatest decrease in RP and VT was observed inside both of the studied groups, and RE - in group B.

**Conclusion.** Patients with implanted cardiac pacemakers for sick sinus syndrome most often have normal levels of pulse arterial pressure (62.5%) ( $p < 0.05$ ). However, correction of pharmaceutical therapy is necessary in patients with a high level of pulse blood pressure due to a more pronounced comorbid pathology and a decrease in vital activity indicators and role functioning due to a physical and emotional state.

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#### CORRELATION BETWEEN ZINC LEVEL AND PHYSICAL DEVELOPMENT OF INFANTS

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**Introduction.** The character of feeding has an essential impact on physical development (PD) and mineral profile (MP) of children. One of the most significant trace element for child's development is zinc (Zn). However, there are present only a few data about depends between infants MP and level of PD according to types of feeding and characteristics or time of introduction of complementary foods (CF).

**The aim of the study:** to study a dynamic of Zn level indicators in infants, depending on the type of feeding, the characteristics of the CF introduction and the PD.

**Materials and methods.** 147 children aged from 5 months to 1 year were examined who were breast fed (BF), formula (FF) and partially breast fed (PBF), and started introducing