

THE IMPORTANCE OF STUDYING THE STRUCTURE OF BLOOD SERUM IN GYNECOLOGY

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Abstract. *Currently, in the structure of population mortality, 57% are diseases of the cardiovascular system, of which 49.3% are due to coronary heart disease (CHD). The study of coronary heart disease, and in particular unstable angina (UA), its complications and the effectiveness of treatment, dictates the need to study risk factors. Goal of work was studying the short-term outcomes of unstable angina in women and men with metabolic syndrome. We examined 58 patients with ischemic heart disease and metabolic syndrome who were treated in the Internal Diseases of the Pediatric Faculty department of SamSMU for the period from 2022 to 2023. Based on the data, it can be concluded that metabolic syndrome develops earlier in women than in men, as a result of which changes in the functioning of the cardiovascular system also appear earlier. Despite this, laboratory indicators indicate that, despite gender differences, there is a tendency to worsen the lipid spectrum and glycemic parameters in patients with unstable angina due to MS.*

Keywords: *arterial hypertension (AH), hyperlipidemia, cardiovascular events (CVE), acute myocardial infarction (AMI), metabolic syndrome (MS), coronary heart disease (CHD), unstable angina (UA).*

Relevance. Over the past 20 years, a large number of studies have been conducted that have confirmed the close relationships between obesity, arterial hypertension (AH), hyperlipidemia, impaired glucose tolerance and cardiovascular diseases. The term “metabolic syndrome” combines a group of risk factors associated with coronary heart disease and/or diabetes. According to a number of authors, in patients with MS, the risks of major cardiovascular events (CVE) increase: stroke, acute myocardial infarction (AMI), sudden death. Patients with metabolic syndrome are characterized by more massive damage to the coronary arteries, a more severe course of coronary artery disease, and a decreased quality of life. Separately, it should be noted that metabolic syndrome (MS) is widespread (according to some authors, more than 20% of the planet's population).

Currently, in the structure of population mortality, 57% are diseases of the cardiovascular system, of which 49.3% are due to coronary heart disease (CHD). The study of coronary heart disease, and in particular unstable angina (UA), its complications and the effectiveness of treatment, dictates the need to study risk factors. It is known that metabolic disorders such as excess body weight, dyslipidemia and impaired glucose metabolism accelerate atherogenesis. All these disorders are components of metabolic syndrome. The issue of the effect of MS on the cardiovascular system has been studied in sufficient detail in the literature, however, the effect of

the syndrome on the results of angioplasty procedures and long-term prognosis of MS requires further study.

However, despite the active study of MS, in the available literature, including publications of leading cardiological and endocrinological associations, there are no clinical recommendations for the management of these patients. The practical importance of these unresolved issues determined the purpose of this work.

Aim of the study: To study the short-term outcomes of unstable angina in women and men with metabolic syndrome.

Materials and methods. Taking into account our goals, we examined 58 patients with ischemic heart disease and metabolic syndrome who were treated in the Internal Diseases of the Pediatric Faculty department of SamSMU for the period from 2022 to 2023.

Clinical examinations were carried out according to a standard scheme, including clarification of complaints, collection of anamneses, assessment of the condition of internal organs and systems, stress echocardiography, ECG. The status of metabolic syndrome was studied through the study of lipid and glycemic spectrum.

The data obtained during the study were subjected to statistical processing using the Microsoft Office Excel-2012 software package on a Pentium-IV personal computer, including the use of built-in statistical processing functions. The arithmetic average value (M), standard deviation, standard error of the average (m), relative values (frequency, %), statistics of the measurements obtained when comparing the average values of the studied indicator significance was determined by calculating the probability of error (P) in testing the normality of the distribution (according to the kurtosis) with Student's test (t).

Results and discussion. The patients were between 30 and 70 years old. The mean age was 48.7 ± 4.5 years. The duration of angina was from 1 to 10 years. 15.51% had a confirmed myocardial infarction in history. Among the surveyed, men accounted for 37.93% (22), women – 62.07%. In the age category of men and women there were different ages, but according to the average BMI was higher in women even at 30 years old, while in men this indicator was higher from the age of 40-45 years.

Anthropometric parameters did not change during antihypertensive therapy. Also in the age group of 30-40 years, there were violations of doctor's orders, non-systematic use of medications, and disruption of the treatment process. Only 5 people from the total sample followed the diet regimen. Initially, the average weight of the patients was 85.7 ± 3.7 kg; if we compare the indicators of women (91.4 ± 2.1 kg) with men (78.3 ± 3.4 kg), we can say that overweight was more common in women. Similar data were obtained for BMI (women 37.2 ± 1.4 kg/m², men 35.3 ± 1.14 kg/m²) and waist circumference (women 134 ± 4.2 cm, men 113 ± 2.8 cm).

It should be noted that both women and men had metabolic syndrome and a certain degree of obesity.

When analyzing the type of activity, the majority of women were housewives, and only a third had any kind of employment. While only one fifth of men were pensioners, the remaining cases were employed. It should be noted that most men worked in office jobs, which means they did not have any physical activity.

Blood tests revealed glycemic changes, low levels of high-density lipoproteins, and elevated levels of C-reactive protein in all patients. In patients with lipid metabolism disorders, the following characteristics were observed: mild hypercholesterolemia (5-6.5 mmol/l) in 45%;

moderate hypercholesterolemia (6.5-8 mmol/l) – in 30%; mild hypertriglyceridemia (1.7-2.3 mmol/l) in 35%; moderate hypertriglyceridemia (2.3-4.5 mmol/l) - in 45%. Severe hypercholesterolemia and hypertriglyceridemia were observed in only 15%. In these indicators, when comparing gender groups, the data were identical.

When studying the immediate outcomes, negative dynamics of the disease were revealed: myocardial infarction developed in 15% of patients, symptoms of coronary heart disease progressed in 40%, and the frequency of arrhythmias increased by 30%.

Patients with metabolic disorders require more careful monitoring both during hospitalization and after discharge from hospital. Identified laboratory parameters, such as hyperglycemia on admission, low high-density lipoprotein levels, elevated C-reactive protein levels, and abnormal ECG and echocardiographic changes, may be predictors of life-threatening cardiac arrhythmias. Interpretation of these indicators will help plan stages of stay in different departments of the hospital, including identifying risk factors for longer stays in intensive care units.

Conclusion. Based on the data, it can be concluded that metabolic syndrome develops earlier in women than in men, as a result of which changes in the functioning of the cardiovascular system also appear earlier. Despite this, laboratory indicators indicate that, despite gender differences, there is a tendency to worsen the lipid spectrum and glycemic parameters in patients with unstable angina due to MS.

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