

autografting was performed with free split thickness graft which was covered with paraffin wound coverings. Beginning with the first days of the postoperative period antioxidant therapy and 6 procedures of HBO in 1,5-1,8 atm were continued. The group of clinical comparison included 14 patients which received traditional therapy. Patients of the main group and the clinical comparison group (CCG) are comparable in sex, age, degree and area of burns.

Curative procedures for the patients of both groups included antibacterial and symptomatic therapy.

The results were analysed on the basis of indices of the course of wound process, cytological study, the study of LPO (diene conjugate – DC), (malondialdehyde – MDA) and antioxidant defense (vitamin “E”, ceruloplasmin) on the first and 21st day of therapy. The degree of differences was significant at $p < 0,05$.

Results: the period of preoperative preparation reduced to $6,4 \pm 0,6$ days in patients of the main group in comparison with the CCG – $10,2 \pm 1,6$ days ($p < 0,05$) due to more active course of the wound process. A complete engraftment of a free autograft was observed in the MG patients in 97,6 % of cases and in the CCG patients – only in 72,5 % of cases. Duration of the temperature reaction made up $8,9 \pm 0,6$ days and that of the wound syndrome made up $8,4 \pm 0,7$ days in the MG, however, in the CCG these indices made up $14,6 \pm 0,7$ days and $13,9 \pm 1,5$ days respectively ($p < 0,05$).

On the first day of therapy cellular composition of the wounds didn't greatly differ in patients of both groups. On the 21st day of therapy restorative and regenerative –and-inflammatory types of cytograms were determined in the MG patients, while the CCG patients still had inflammatory-regenerative type of cytograms.

At the beginning of therapy in patients of the MG and CCG there were no great differences in indices of LPO and AOD. On the 21st day of therapy indices of m.u. decreased 45,8 % and RC – 44,9 % in patients of the MG while in the CCG patients indices of m.u. decreased 21,4 % and RC – 32,7 %. The content of AOD components increased much more in the MG than in the CCG. In patients of the MG the content of vitamin “E” increased 37,1 % and ceruloplasmin 33,4 %, however, in the CCG – 7,7 % and 2,6 %, respectively.

Conclusion. Application of HBO and antioxidant therapy favours the correction of LPO and AOD disorders, thus it allows to improve the results of treatment of patients with deep burns.

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CYTOFLAVIN IN THE CORRECTION OF REPERFUSION ARRHYTHMIAS

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Abstract Reperfusion arrhythmias are the result of the dramatic cellular, metabolic and local electrophysiological changes during restoration of coronary blood flow. The given pathophysiological mechanisms of their occurrence, justified the use of metabolic agents that have a cardioprotective effect, along with standard anti-arrhythmic therapy. The results of these studies demonstrated the efficacy of cytoflavin in the correction of processes of lipid peroxidation in patients with reperfusion arrhythmias.

Key words: cytoflavin, reperfusion arrhythmia, biological membranes lipid peroxidation, products of peroxidation (lipid hydroperoxides, diene conjugates, malonic dialdehyde), antioxidant system.

Recently, it is believed that the main therapeutic measures in patients with reperfusion arrhythmias should be directed at correction of metabolic and electrolyte balance, elimination of ischemia/reperfusion injury of the myocardium in the pathogenesis of which of great importance are the processes of lipid peroxidation, cytotoxic free radicals. The most studied effect of such metabolic means like trimetazidine, magnesium sulfate, mildronat, dipyridamole, cytoprotective action which is implemented by means of neutralizing or reducing the impact of damaging factors on the cell membrane of viable myocardium during ischemia. The aim of this work was to study the effects of cytoflavin on the intensity of peroxidation processes in patients with reperfusion arrhythmias. Cytoflavin ("Polisan") is a complex drug consisting of succinic acid, riboxin, nicotinamide, riboflavin mononucleotide, N-methylglucamine.

Materials and methods. The study was conducted in conditions of the resuscitation and anesthesia Department of the Amur regional clinical hospital on 40 patients. The control group of patients not cytoflavin injected. The experimental group patients, along with standard anti-arrhythmic therapy was administered to 20 ml of cytoflavin intravenously 30 minutes before coronary angiography (stenting). Blood sampling was per-

formed 30 minutes and 12 hours after coronary angiography in control and experimental groups. The intensity of peroxidation processes was assessed by examining the contents of lipids hydroperoxides, diene conjugates, malonic dialdehyde and the main components of the antioxidant system (ceruloplasmin, vitamin E) in the plasma of blood. The results obtained were subjected to statistical analysis with calculation of parametric criteria of Student.

The results showed that the introduction of cytoflavin contributes to the decrease in the intensity of peroxidation processes, as indicated by the decrease in the content of hydroperoxides of lipids (24-28%), diene conjugates (29-32%), malonic dialdehyde (18-22%) in blood plasma of patients of the experimental group in comparison with control. In turn, analyzing the effect of cytoflavin on the activity of antioxidant system, increased levels of vitamin E and ceruloplasmin by 20-23% and 26-30%, respectively in patients after coronary angiography (stenting).

Thus, the stabilization of processes of lipid peroxidation of biomembranes in conditions of introduction of the intravenous drip of cytoflavin patients reduces the incidence of reperfusion arrhythmias.

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MORPHOLOGICAL CHANGES OF PLACENTA IN PATIENTS WITH BRONCHIAL ASTHMA

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Abstract Placental insufficiency is a symptom testifying inhibition of gestational dominants. PI is associated with impaired maternal hemodynamics, aided and bronchial asthma. The analysis of the placenta of 82 patients with asthma of varying severity was made. There were 3 groups - patients with exacerbation of asthma during pregnancy; without exacerbation; healthy patients - control group. The article considers the condition of the placenta by morphological study with the influence of bronchial asthma.

Key words: bronchial asthma, pregnancy, placenta

Placental insufficiency - a symptom arising in many pregnancy complications, indicative about inhibition of gestational dominants. One of the leading stages of pathogenesis of placental insufficiency is a problems of adaptation mechanisms in the system "mother-placenta-fetus". The development of placental insufficiency associated with impaired maternal hemodynamics, aided by the complicated course of pregnancy and extra-