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Відповідальність за вірогідність фактів, цитат, прізвищ, імен та інших даних несуть автори. У тезах збережено авторське подання матеріалів.

the number of PAS + - cells in the respiratory part of the lung decreases gradually and approaches the indices of the intact and control groups by the 44th day of the experiment. The obtained dynamics of number of goblet cells and PAS⁺ - cells in the airways and the respiratory part of the lung explains the most pronounced manifestations of nonspecific mechanisms of resistance of the respiratory system in the early stages of the development of allergic inflammation. Adaptive immune response manifests in late period of development of allergic inflammation by increase in number of lymphoid nodules.

Conclusion. The histological and histochemical analysis of guinea pigs' lungs on the 23rd, 30th, 36th and 44th days of experimental ovalbumin-induced allergic inflammation made it possible to establish the morphological manifestations of nonspecific resistance of the lungs, which are represented by protective and compensatory changes in their structural components. Therefore, the results of this study suggest that the epithelium of the airways and the respiratory part of the lungs, the secretory products of the epithelial cells of the lungs and components of the connective tissue are important modulators of the inflammatory and immune responses of the lungs due to affect of allergens.

ANXIETY IN PATIENTS WITH PARKINSON'S DISEASE

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Introduction: Anxiety is not only a personality trait, but also has adaptive functions. It may differ in patients with Parkinson's disease (PD). According to the literature, anxiety affects up to 40% of patients with PD. It is a behavioral change that has the greatest impact on patients' quality of life. However, anxiety is very often underestimated and not diagnosed in such patients. Currently, there is little data on the structure of anxiety in patients with PD.

Material and methods: the level of anxiety was assessed according to the Spielberg-Khanin questionnaire in 60 patients with PD II-III stages. Situational anxiety (SA) characterizes the level of stress (state of anxiety) at the moment, and personal anxiety (PA) - vulnerability to stressors in general. The result was interpreted as follows: up to 30 - low anxiety; 31 - 45 - moderate anxiety; 46 and more - high anxiety.

Results: An increase in anxiety, PA and SA was registered in 100% of cases. The mean PA score was 46.9 ± 11.1 ; SA - 46.0 ± 14.0 . At the same time, moderate PA was registered in 25% of cases and SA in 33% of cases. Expressed PA in 75% of cases and SA in 57% of cases.

Conclusions: patients with PD have moderate and high PA and SA. High levels of PA indicate the initial vulnerability of patients to stressors, which is a predictor of state of anxiety. Most patients have high levels of stress at the moment, which can lead to personality destabilization and exacerbate the psychosomatic manifestations of the underlying neurodegenerative disease.

CORRECTION OF PHARMACOTHERAPY OF STABLE FORMS OF CORONARY HEART DISEASE IN SMOKERS WITH CONCOMITANT NEUROHUMORAL AND PSYCHO-EMOTIONAL DISORDERS

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Introduction: For smokers with coronary heart disease (CHD) a "pathological vicious circle" is one of the most prevalent characteristics. On the one hand, smokers have increased activity of the sympathoadrenal system, the release of the "stress" hormone cortisol and increased anxiety and depressive disorders (ADD), on the other - sympathoadrenal activity also increases in patients with CHD, especially with concomitant ADD which determine the impact on the prognosis of somatic disease due to deteriorating adherence to treatment. Patients with ADD often do not follow the doctor's recommendations on lifestyle modifications. Due to the high risk of adverse prognosis in such patients, correction of psycho-emotional, metabolic and neurohumoral status is necessary, which has a positive effect on the overall cardiovascular prognosis.

Aim: To study the efficacy and tolerability of phenibut in the complex treatment of a smoker with stable CHD based on the analysis of clinical dynamics, daily cortisol levels, indicators of daily blood pressure monitoring (DBPM) and psycho-emotional status.

Clinical case: In the cardiology department of Lviv Emergency Hospital a 62-years-old patient was hospitalized with complaints of squeezing pain in the heart, which occurred with increasing exercise (when climbing stairs to the 3rd floor), headache, frequent flickering "flies" before eyes, blood pressure (BP) instability during the day (maximum blood pressure 200/110 mm Hg). From the anamnesis it is known that he has been ill for the last 15 years, when he first noticed shortness of breath with increasing physical activity and BP instability. In 2010 suffered a myocardial infarction (STEMI of the lower wall of the left ventricle). Medications (antiplatelets, nitrates) are taken sporadically. The patient has been smoking for the last 30 years. He smokes up to