

«УРОЛОГІЯ, АНДРОЛОГІЯ, НЕФРОЛОГІЯ – ДОСЯГНЕННЯ, ПРОБЛЕМИ, ШЛЯХИ ВИРІШЕННЯ»: Матеріали ювілейної науково-практичної конференції / Під ред. В.М.Лісового, І.М.Антоняна та ін. – Харків, 2018. - 360 с.

У збірнику всебічно висвітлені питання найбільш поширених захворювань сечовидільної та статевих системи. У тематичних розділах представлені статті та тези, присвячені найбільш актуальним проблемам онкологічної, геріатричної та педіатричної урології; представлені досягнення візуальної та лабораторної діагностики, досвід хірургів-урологів і лікарів-репродуктологів. Особливу увагу приділено актуальним проблемам нефрологи, трансплантації та діалізу.

Матеріали представляють науковий і практичний інтерес для урологів, андрологів, гінекологів, нефрологів, трансплантологів, хірургів, сексопатологів, сімейних лікарів і лікарів-інтернів.

Редакційна колегія: В.М. Лісовий, І.М. Антонян, Н.М.Андон'єва, Д.В.Щукін, І.А.Гарагатий, А.В.Аркатов, В.І. Савенков, Г.Г.Хареба, І.А.Туренко, Р.В.Стецишин, Т.О.Торак

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A significant weakening of free radical oxidation of lipids was the result of the activation of enzymatic antioxidant defense system. Activation of defense mechanisms under the influence of ozone therapy occurred with less intensity compared with the processes of lipid peroxidation, and it is seen well judging by the catalase activity rate. On the 3rd -4th day its activity was $22,06 \pm 1,19$ Meh103 from the baseline. Only nine days after ESWL its activity does not differ at all from that of the comparison group of individuals ($24,61 \pm 1,1$ Meh103).

Conclusions: The activity of the enzyme glutathione peroxidase and glutathione reductase in the early postoperative period, i.e. on the 3rd -4th day, in patients of the comparison group tended to a sharp decline and remained at a lower level than at the preoperative stage. At the same time, the activity of glutathione reductase and glutathione peroxidase after ozone therapy tended to increase by 15% and 27% on the 3rd -4th day, and further the activity indices remained at a consistently high level.

It can be assumed that the activation of aerobic ways of energy production contributed to the biosynthetic functions, such as accelerated biosynthesis of proteins and enzymes, including ceruloplasmin enzyme.

The enzyme activity of peroxidase increased. After 3-4 days and on the 9th -10th days its activity was higher in patients who had undergone ozone therapy and accounted for 19.6% of the initial level. The atomic oxygen (ozone decay product) may be a specific inducer, under whose influence the synthesis of this enzyme in tissues takes place

Changes in the activity of the blood LDG, in general, resembled the development of changes in the comparison group of people, who hadn't used the ozone therapy. Indices of LDH activity 10 days after ESWL did not differ from that of the activity of healthy individuals. In LDG isozyme spectrum of blood LDG1,2,4 fractions prevailed in 3-4 days after ESWL. However, after 10 days of postoperative course there was a slight increase in activity of fractions LDG4 and LDH5 which indirectly points to an increasing permeability of parenchymatous organs cellular membranes.

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OUR EXPERIENCE OF TWO GUIDE WIRES URETEROSCOPY TECHNIQUE

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Purpose: To evaluate the safety and efficacy of the two-wires technique for acute dilatation of intramural ureter.

Material & Methods: Between April 2014 and April 2018, 237 ureteroscopic procedures for ureteral stones were performed without any form of ureteral dilatation. A 9.5 Fr semirigid ureteroscope (Storz, Germany) were used in all cases. Difficulty at ureteroscopic introduction were encountered in 65 cases (43 males, 12 females) where acute dilatation of the intramural ureter using this technique were done. The first guidewire (0.025) was placed into the ureter. The second working guidewire (0.025) was inserted through the working channel of the ureteroscope into the ureter under fluoroscopy till reaching the renal pelvis, in order to back load the ureteroscope. Then the ureteroscope is rotated so it became between the first guidewire (outside the ureteroscope) and

the second working guidewire (inside the ureteroscope) and advanced by passing the intramural segment.

Results The average age was 47 years (range 23–72 years). The mean operative time was 37 minutes (range, 18–73 minutes). The procedure was successful in all cases without intraoperative complications in the form of perforation or intramural false passage as seen by intraoperative ureteroscopy. No patient required active dilation by balloon or Teflon dilators to access the ureter. Ureteral stents were inserted in 19 cases for 2 weeks due to prolonged procedures. All the patients were discharged from the hospital within 24 –48 hours postoperatively. No postoperative complications in the form of urinary tract infection, fever or pain. Post operative follow up ultrasonography showed no PUJ obstruction in any cases.

Conclusion Acute dilatation of the intramural ureter by the two-wires technique is easy, time saving and cost effective, with no associated complications.