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Assessment of the liver state in patients with chronic pancreatitis associated with metabolic syndrome

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Introduction: The major ingredients of the metabolic syndrome (MS) closely connect with functional state of the organs of the digestive system.

Aims: Purpose of investigation was to study some features of metabolic disturbances of the liver in the patients with chronic pancreattis associated with MS.

Materials & methods: Material and methods: The study was carried out on 52 patients, of them 9 males and 43 females.

Results: The state of dsylipidemia expressed in the majority of patients with associated form of pathology showed formation of the resistance to insulin. The changes revealed in the blood lipid spectrum was accompanied by increase in levels of non-etherificated fatty acids, on the average, tree times and indicated about damage of their transfer by blood and absorption by cells. Increase in blood of the levels of free fatty acids was accompanied by the hyperinsulinemia and provided disorder of the function of the receptors to insulin and absorption glucose by cells.

First of all the complex of systemic metabolic changes involves carbohydrate metabolism in the liver hepatocytes and the in the other organs. Under these conditions mitochondria and cellular membranes become insensitive to hormone effect and the pathological syndrome of resistance has been developed to the effect of insulin. The results of blood investigations showed also 2,5-fold higher levels of mitochondrial enzyme malatdehydrogenase (p<0,05).

Conclusion: Thus, in the patients with CP associated with MS there was observed disorders in the glucose-insulin homeostasis related to hormonal disorders and also to change of metabolism in the cells induced by free fatty acids.

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Influence of pinaverium bromide on the dynamics of pain intensity and 'deviation' of pancreatic enzymes to blood in patients with chronic pancreatitis (CP)

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Introduction: Organic and functional changes of Oddi's sphincter have great importance in the pathogenesis of CP. Pinaverium bromide has spasmolytical influence on this sphincter.

Aims: To evaluate the efficiency of the pinaverium bromide in the treatment of CP patients.

Patients & methods: We observed 64 patients with CP. 32 of them (main group) received traditional therapy in combination with pinaverium bromide. Other 32 patients (comparison group) received only traditional treatment. We studied the dynamics of pain and activity of blood and urine a-amylase and pancreatic isoamilase (P-isoamilase), level of lipase and immunoreactive tripsin in blood. We estimated the dynamics of pain with average severity index.

Results: At the end of the treatment pain disappeared or became minimal in 87.1% patients of the main group and in 63.9% patients of the comparison group. ImmunĐ 3 / $_4$ reactive tripsin in blood decreased from 125,3±13,8 ng/ml to 70,4±8,6 ng/ml (p<0,05) in patients of the main group and from 126,3±15,8 ng/ml to 95,7±12,1 ng/ml (p>0,05) in patients of the comparison group. Level of P-isoamylase in blood decreased from 1,42±0,16 mccat/l to 0,93±0,11 mccat/l (p<0,05) and from 1,44±0,13 mccat/l to 1,27±0,16 mccat/l (p>0,05) correspondingly. Level of P-isoamylase in urine decreased from 4,91,42±0,38 mccat/l to 3,41±0,17 mccat/l (p<0,05) and from 4,88±0,39 mccat/l to 4,54±0,28 mccat/l (p>0,05) respectively. Level of lipase in blood decreased from 42,0±4,0 u/l to

 32.0 ± 3.0 u/l (p<0.05) in patients of the main group and from 41.0 ± 5.0 u/l to 38.0 ± 5.0 u/l (p>0.05) in patients of the comparison group.

Conclusion: Inclusion of pinaverium bromide into the treatment of CP could be effective.

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Dynamics of exocrine pancreatic function in patients with chronic pancreatitis (CP) under the influence of magnesium preparation treatment

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Introduction: CP is an inflammatory disease characterized by impairment of exocrine function.

Aims: To study the effect of the magnesium preparation in CP treatment on exocrine pancreatic function.

Patients & methods: 64 patients with CP were examined. They were divided into 2 groups: 32 patients in each group. Study group patients in addition to conventional therapy received Magnesium preparation (1 ampoule per os tid). Comparison group patients received only conventional treatment. Pancreatic elastase-1 level was examined in stool at admission and after treatment.

Results: Before treatment test results were normal in 38 (59.4%) patients. Mild pancreatic insufficiency was observed in 14 (21.9%) patients, moderate \hat{a} ۥ in 7 (10.9%) patients, severe \hat{a} ۥ in 5 (7.8%) patients. After treatment there was greater positive dynamics of fecal elastase level in study group versus comparison group. Normal fecal elastase-1 levels were detected in 18 (56.2%) and 20 (62.5%) patients, mild \hat{a} ۥ in 8 (25.0%) and 6 (18.7%) patients, moderate \hat{a} ۥ in 4 (12.5%) and 3 (9.4%) patients, severe \hat{a} ۥ in 2 (6.3%) and 3 (9.4%) patients of study and comparison groups, respectively. After treatment 1 patient of study group who initially had moderate pancreatic insufficiency after treatment had mild one. And 4 patients who initially had mild insufficiency after treatment had normal function. In comparison group patients who initially had moderate and severe pancreatic insufficiency after treatment still had insufficiency of the same degree. Only 1 comparison group patient who initially had mild insufficiency had normal function after treatment.

Conclusion: Addition of magnesium preparation to CP treatment improves exocrine pancreas function.

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Famotidine in the treatment of chronic pancreatitis

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Introduction: Famotidine (H2- histamine blockers) firmly holds an appropriate place in the treatment of acid-dependent diseases (which include chronic pancreatitis).

Aims: To study the effect of famotidine (kvamatel) on lipid peroxidation in patients with chronic pancreatitis (CP), combined with coronary heart disease (CHD).

Patients & methods: The research included 51 patients with chronic pancreatitis and 10 healthy volunteers, of which there were 32 men, women - 31. The groups were matched for sex, age, duration of disease. Famotidine (kvamatel) was given by 20 mg at night and 20 mg in the morning 45 minutes after meals for 14 days. Product of lipid peroxidation (LPO) - malondialdehyde (MA) and reduced glutathione (as an enzyme that determines the reaction of antioxidant) in the blood investigated by the method of Y.A. Vladimirov, A.I. Archakova (1972) and modified by I.F. Meschishen (1983).

Results: Analysis of the results showed that lipid parameters significantly (p <0.005) higher in patients with CP combining with coronary