



THE SEVENTH INTERNATIONAL SCIENTIFIC – PRACTICAL VIRTUAL CONFERENCE IN
MODERN MEDICINE AND HEALTH: PROGNOSIS, ACHIEVEMENT AND CHALLENGES

CONFERENCE PROCEEDINGS

AZERBAIJAN-ESTONIA-KAZAKHSTAN-TURKEY

ESTONIA, TALLINN APRIL 29-30, 2022



**THE SEVENTH INTERNATIONAL SCIENTIFIC – PRACTICAL
VIRTUAL CONFERENCE IN MODERN MEDICINE AND HEALTH:
PROGNOSIS, ACHIEVEMENT AND CHALLENGES**

CONFERENCE PROCEEDINGS

AZERBAIJAN-ESTONIA-KAZAKHSTAN-TURKEY

ESTONIA TALLINN APRIL 29-30, 2022



TALLINN 2022



Organizer of the conference:

MTÜ. The International Center for Research Education & Training. (Estonia, Tallinn).
LTD The Southern Caucasus International Academy of Modern Sciences. (UK, London).
LTD. Aspendos-Academy. International Academy of Medical and Social Sciences. (UK, London).
WKMU Marat Ospanov (Kazakhstan, Aktobe)
Tugay Pharmacy Company (Azerbaijan, Baku)

Invited organizations:

Izmir Tepejik Training & Research Hospital. (Turkey)
Azerbaijan Medical University (Azerbaijan)
Tbilisi State Medical University (Georgia).
Semey Medical University (Kazakhstan, Semey).
Kyrgyz State Medical Academy named after I. K. Akhunbaev. (Kyrgyzstan)
National Surgical Center named after M.M. Mamakeev. (Kyrgyzstan)
David Agmashenebeli Academy. (Georgia)
Al-Farabi Kazakh National University. Faculty of Medicine and Health care Higher School of Medicine.
NGO Education Support & Investment Fund (Georgia, Tbilisi)
Teaching University Millennium (Georgia)
New Vision University (Georgia)



TABLE OF CONTENTS

Organizing Committee	04
Scientific Committee	05
Publishing committee	06
Editorial Board	07
Program at a Glance	08
Abstracts and Theses	10



ORGANIZING COMMITTEE

Aytekin Hasanova

Azerbaijan Medical University. I Preventive Medicine Faculty. Deputy of Dean. PhD in Medical Biology.

Aytan Huseynova

Director. Aspendos International Academy of Medical and Social Sciences. LTD. (UK London).

Davit Tophuria

Tbilisi State Medical University. Head of International Students Academic Department, Associate Professor. PhD in HNA.

Gulmira Zhurabekova

Department of fundamental Medicine, Higher School of Medicine. Al Farabi Kazakh National University. Associate Professor.

Maia Matoshvili

Tbilisi State Medical University. The First University Clinic. Dermato-Venereologist. Assistant Professor. PhD in DAPS.

Marat Sarkulov

Candidate of Medical Sciences, the chairman of Urology Department, West Kazakhstan Marat Ospanov Medical Melis Gonulal

University of Health Sciences, İzmir Tepecik Training and Research Hospital, Associate Professor. PhD in Medicine.

Namig Isazade

International Research, Education & Training Center. MTÜ. PhD in Business Administration.

Nana Jikia

Rector of the Academy. Full professor. Full member and academician of Phasis Academy. Member of the Scientific Council of the Tao-Klarjeti Academy.

Nino Didbaridze

Tbilisi State Medical University. Microbiology and Immunology Department. Immunology Direction. PhD MD.

Nino Pirtskhelani

Tbilisi State Medical University. Associated Professor. Department of Molecular and Medical Genetics.

Nodar Sulashvili

Doctor of Theoretical Medicine in Pharmaceutical and Pharmacological Sciences, Professor of Millennium University, Head of The International English Pharmacy Program, Head of The Division of Pharmacology.

Zhanslu Sarkulova Zhanslu Nukinovna - Doctor of Medical Sciences, Professor, Department of Anesthesiology and Reanimatology t, West Kazakhstan Marat Ospanov Medical University;

Tamara Abaeva

Associate Professor, PhD in Medicine, Head of the Department of Normal and Topographic Anatomy, Kyrgyz State Medical Academy.

Zhanslu Sarkulova

Doctor of Medical Sciences, Professor, Department of Anesthesiology and Reanimatology, West Kazakhstan Marat Ospanov Medical University



SCIENTIFIC COMMITTEE

Aytekin Hasanova

Azerbaijan Medical University. I Preventive Medicine Faculty. Deputy of Dean. PhD in Medical Biology.

Davit Tophuria

Tbilisi State Medical University. Head of International Students Academic Department, Associate Professor. PhD in HNA.

Elmira Aliyeva

AMU. Head of the Department of Obstetrics and Gynecology I. Doctor of Medical Sciences. Professor.

Ekaterine Lomia

Millennium University.

Gulmira Zhurabekova

Department of fundamental Medicine, Higher School of Medicine. Al Farabi Kazakh National University. Associate Professor.

Maia Matoshvili

Tbilisi State Medical University. The First University Clinic. Dermato-Venereologist. Assistant Professor. PhD in DAPS.

Marat Sarkulov

Candidate of Medical Sciences, the chairman of Urology Department, West Kazakhstan Marat Ospanov Medical University.

Melis Gonulal

University of Health Sciences, İzmir Tepecik Training and Research Hospital, Associate Professor. PhD in Medicine.

Namig Isazade

International Research, Education & Training Center. MTÜ. PhD in Business Administration.

Nana Jikia

Rector of the Academy. Full professor. Full member and academician of Phasis Academy. Member of the Scientific Council of the Tao-Klarjeti Academy.

Nino Didbaridze

Tbilisi State Medical University. Microbiology and Immunology Department. Immunology Direction. PhD MD.

Nino Pirtskhelani

Tbilisi State Medical University. Associated Professor. Department of Molecular and Medical Genetics.

Nodar Sulashvili

Doctor of Theoretical Medicine in Pharmaceutical and Pharmacological Sciences, Professor of Millennium University, Head of The International English Pharmacy Program, Head of The Division of Pharmacology.

Saadat Safarova

AMU. Department of Obstetrics and Gynecology I. PhD in Medicine. Associate Professor.

Saadat Sultanova

AMU. Department of Obstetrics and Gynecology I. Doctor of Medical Sciences. Professor.

Sabina Mashadiyeva

AMU. Department of Internal Medicine II. PhD in Medicine. Associate Professor.

Sain Safarova

AMU. Department of Internal Medicine II. PhD in Medicine. Associate Professor.

Tamara Abaeva

Associate Professor, PhD in Medicine, Head of the Department of Normal and Topographic Anatomy, Kyrgyz State Medical Academy.

Tamar Didbaridze

Tbilisi State Medical University, First University Clinic. PhD in MD, Tbilisi, Georgia.

Zhanslu Sarkulova

Doctor of Medical Sciences, Professor, Department of Anesthesiology and Reanimatology, West Kazakhstan Marat Ospanov Medical University



PUBLISHING COMMITTEE

Namig Isazade

International Research, Education & Training Center. MTÜ. PhD in Business Administration.

Aytan Huseynova

Director. Aspendos International Academy of Medical and Social Sciences. LTD. (UK London).



EDITORIAL BOARD

Aytekin Hasanova

Azerbaijan Medical University. I Preventive Medicine Faculty. Deputy of Dean. PhD in Medical Biology.

Gulmira Zhurabekova

Department of fundamental Medicine, Higher School of Medicine. Al Farabi Kazakh National University. Associate Professor, M.D., PhD.

Maia Matoshvili

Tbilisi State Medical University. The First University Clinic. Dermato-Venereologist. Assistant Professor. PhD in DAPS.

Marat Sarkulov

Candidate of Medical Sciences, the chairman of Urology Department, West Kazakhstan Marat Ospanov Medical University.

Melis Gonulal

University of Health Sciences, İzmir Tepecik Training and Research Hospital, Associate Professor. PhD in Medicine.

Mina Qarashova

AMU. Department of Obstetrics and Gynecology I. PhD in Medicine. Associate Professor.

Mariam Darbaidze

David Aghmashenebeli National Defence Academy of Georgia. Deputy Head of Quality Assurance Service. Georgian National University SEU. Professor of Medicine faculty. PhD in Biology. Alterbridge-International University of Management and Communication. Vice rector.

Namig Isazade

International Research, Education & Training Center. MTÜ. PhD in Business Administration.

Nino Didbaridze

Tbilisi State Medical University. Microbiology and Immunology Department. Immunology Direction. PhD MD.

Nino Pirtskhelani

Tbilisi State Medical University. Associated Professor. Department of Molecular and Medical Genetics.

Saadat Safarova

AMU. Department of Obstetrics and Gynecology I. PhD in Medicine. Associate Professor.

Saadat Sultanova

AMU. Department of Obstetrics and Gynecology I. Doctor of Medical Sciences. Professor.

Sain Safarova

AMU. Department of Internal Medicine II. PhD in Medicine. Associate Professor.

Zhanslu Sarkulova

Doctor of Medical Sciences, Professor, Department of Anesthesiology and Reanimatology, West Kazakhstan Marat Ospanov Medical University



PROGRAM AT A GLANCE

First day	29 April 2022
Moderators	Namig Isazade, Ekaterine Lomia
Opening ceremony	Namig Isazade
19.00-19.20	Zhanslu Sarkulova West Kazakhstan Marat Ospanov Medical University. Kazakhstan
	Ekaterine Lomia Teaching University Millennium. Georgia.
19.20-19.40	Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Satenov J.K., Zhankulov M.H., Jienalin R.N., Musina N.A. THE MOST COMMON MISTAKES MADE IN THE MANAGEMENT AND TREATMENT OF PATIENTS WITH SEVERE COVID-19.
19.40-20.00	Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Tleuova A.S., Kalieva B.M., Daniyarova K.R., Zhumagaliev E.K. THE VALUE OF LACTATE IN THE BLOOD IN ASSESSING THE PROGNOSIS OF THE DISEASE IN PATIENTS WITH ACUTE NEUROPATHOLOGIES.
20.00-20.20	Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Tleuova A.S., Kalieva B.M., Daniyarova K.R., Zhumagaliev E.K., Musina N.A. THE INCIDENCE OF PNEUMONIA IN PATIENTS WITH ACUTE CEREBRAL CIRCULATORY DISORDERS.
20.20-20.40	Чынгышова Ж.А., Тилеков Э.А., Апиева Э.И. МУЛЬТИМОДАЛЬНОЕ ОБЕЗБОЛИВАНИЕ ПРИМЕНЕНИЯ АНАЛЬГЕТИКА ДЕКСАЛЬГИНА НА ЭТАПЕ ПРОВЕДЕНИЯ АНЕСТЕЗИОЛОГИЧЕСКОГО ПОСОБИЯ В ЭКСТРЕННОЙ ХИРУРГИИ.
20.40-21.00	Nonkulovski D., Zhivkovska L., Duma F., Sofijanov A., Bojadzieva S., Kirovski I. Muaremoska-Kanzoska L., Alili-Ademi L. TROMBOSIS IN CHILD WITH POST COVID-19 INFECTION.
21.00-21.20	Learta Alili Ademi, Blerim Ademi EPILEPSY IN CHROMOSOMAL DISORDERS: LITERATURE REVIEW OF SEIZURE TYPES, EEG FINDINGS AND TREATMENT.
21.20-21.40	Marina Giorgobiani, Nana Gorgaslidze, Nodar Sulashvili THE SPECIFICITIES AND PHARMACOLOGICAL ACTION OF GEOMIN FORTE FOR THE COVID-PANDEMIC THERAPY
21.40-22.00	Nodar Sulashvili, Kakhaber Robakidze, Nana Gorgaslidze, Luiza Gabunia, Lela Grigolia SOME MICROBIOLOGICAL MARKERS OF THE ORAL CAVITY OF ORTHOPEDIC PATIENTS.
22.00-22.20	Nodar Sulashvili, Luiza Gabunia, Nana Gorgaslidze THE PECULIARITIES OF REMDESIVIR AND ITS OUTLOOKS FOR THE TREATMENT OF COVID-19 DISEASE.
22.20-22.40	Nana Jikia ROLE OF HEALTHCARE SERVICES.



Second day	30 April 2022
Moderators	Namig Isazade, Zamina Akhundova
19.00-19.20	Aytən Əsədova QARACIYƏRDƏN XARIC ÖD YOLLARININ YATROGEN ZƏDƏLƏNMƏLƏRİ.
19.20-19.40	Ahliman Amiraslanov, Sevinj Abdiyeva, Elnur İbragimov, Azer Amiraslanov, Habil Muradov THE PROGNOSTICAL MEANING OF CD31 RECEPTOR OF VASCULAR ENDOTELIAL GROWTH FACTOR IN SOFT TISSUE TUMORS.
19.40-20.00	Nurlana Qibləliyeva YUMURTALIQ ŞİŞLƏRİNİN ERKƏN DIAQNOSTİKASINDA MÜASİR MEYARLAR.
20.00-20.20	Tamara Quliyeva SÜD VƏZİSİNİN FİLLOID ŞİŞLƏRİ, YENİ YANAŞMALAR.
20.20-20.40	Aynur Jabiyeva ULTRASONIC DEVICE WITH A TEMPORARY AUTOMATIC ADJUSTMENT GENERATOR
20.40-21.00	Nezrin Kerimli BESLENMEDE FERDI YANAŞMA.
21.00-21.20	Sevinc Seferova QASTROINTESTINAL XƏSTƏLİKLƏRDƏ FUNKSIONAL YANAŞMA.
21.20-21.40	Gunel Çıraqova BÖYRƏK XƏSTƏLİKLƏRİNDƏ BƏSLƏNMƏ.
21.40-22.00	Асадов Билал, Вагабов Насими, Исмаилова Арзу, Асадова Шафар, Вагабова Шарифа, Амирасланова Шефа. ОСОБЕННОСТИ ФИЗИЧЕСКОГО И ПОЛОВОГО РАЗВИТИЯ ДЕВОЧЕК С ЗАДЕРЖКОЙ УМСТВЕННОГО РАЗВИТИЯ.
22.00-22.20	Jamilya Ismailova, Bilal Asadov FEATURES OF STUDYING THE NEEDS OF PATIENTS WITH SCHIZOPHRENIA AND THEIR FAMILY MEMBERS IN THE CONTEXT OF THE BIOPSYCHOSOCIAL APPROACH.
22.20-22.40	Bilal Asadov, Nasimi Vahabov FEATURES OF THE CURRENT AND CLINICAL CLASSIFICATION OF THE ACTIVE VARIANT OF KANDINSKY-CLERAMBO SYNDROME IN THE CLINIC OF SCHIZOPHRENIA.
22.40-23.00	Turan Nadirova UŞAQLIQ BOYNU XƏRÇƏNGİNDƏ BİRİNCİLİ VƏ İKİNCİLİ PROFİLAKTIKA
23.00	Closing ceremony



ABSTRACTS AND THESES

EPILEPSY IN CHROMOSOMAL DISORDERS: LITERATURE REVIEW OF SEIZURE TYPES, EEG FINDINGS AND TREATMENT

Leartha Alili Ademi, MD¹, Blerim Ademi, MD²

¹ University clinic for pediatric diseases, department of neurology, Skopje, North Macedonia

² University clinic of neurology, Skopje, North Macedonia

ABSTRACT

Chromosomal disorders are heterogeneous conditions which often are associated with epilepsy. As each chromosomal syndrome has specific characteristics regarding the type of epileptic seizures, electroencephalographic (EEG) findings and specific response to antiepileptic drugs (AED), it is very important to know these characteristics, in order to avoid exacerbation of seizures or side effects. These neurogenetic developmental diseases are characterized by intellectual disability, dysmorphic features, behavior problems (autism, hyperactivity, etc.), neurologic and/ or psychiatric diseases, and different malformations. Epileptic seizures are common features of most of these conditions, in some of which appearing as typical and peculiar while in others nonspecific. Proper characterization of epileptic syndrome in these patients leading to early diagnosis and a proper treatment of epilepsy are essential for a good outcome and a better quality of life. Therefore, it is crucial to investigate the associations between specific chromosome abnormalities and epilepsy to identify genes involved in epilepsy and treat them effectively and properly. The most common chromosomal developmental syndromes in which epilepsy is a common and consistent finding are reported to be: Down syndrome, Angelman syndrome, Prader-Willi syndrome, Miller-Dieker syndrome, Wolf-Hirschhorn syndrome, ring 20 syndrome, 1p36 monosomy, the fragile-X (fra-X) syndrome and other syndromes.

Keywords: epilepsy, chromosomal disorders, seizures, treatment

ВЛИЯНИЕ ПАНДЕМИИ КОВИД-19 НА ГОРМОНАЛЬНЫЙ СТАТУС И ПСИХИЧЕСКОЕ ЗДОРОВЬЕ ЖЕНЩИН

Билал Асадов, Насими Вагабов

Кафедра психиатрии АМУ.

РЕЗЮМЕ

На фоне стремительного распространения пандемии коронавирусного заболевания (COVID-19) на большинство стран мира, у широких масс населения возникает чувство тревоги, страха и стресса, что является вполне естественной и нормальной реакцией на постоянно меняющуюся и непредсказуемую ситуацию, в которой мы все оказались.

Пандемия коронавирусной инфекции уже повлияла на ментальное здоровье миллионов людей во всем мире. Страх заболеть, инфицировать близких и коллег, потерять работу, умереть — это вселяет беспокойство чаще всего. Во многих странах, в том числе и в нашей стране, среди тех, кто обращается за помощью к психологам, каждому второму диагностируют тревожное расстройство. Специалисты говорят, что вирус с короной повлиял даже на тех, кто не



переболел. Стрессы, тревожные расстройства и депрессии наблюдаются у людей по всему миру. Ученые предупреждают, что последствия стресса скажутся на здоровье детей, рождающихся сейчас. Это поколение уже называют «корониалами».

SOME MICROBIOLOGICAL MARKERS OF THE ORAL CAVITY OF ORTHOPEDIC PATIENTS

**Nodar Sulashvili¹, Kakhaber Robakidze², Nana Gorgaslidze³, Luiza Gabunia⁴,
Lela Grigolia⁵**

¹MD, PhD, Doctor of Theoretical Medicine in Pharmaceutical and Pharmacological Sciences, Professor of Millennium University, Head of The International English Pharmacy Program, Head of The Division of Pharmacology, Georgia.

²MD, PhD, Doctor of Medical Sciences, Professor of The Department of Dentistry at Caucasus International University; National Health Center named after Academician O. Gudushauri; Georgia;

³MD, PhD, Doctor of Pharmaceutical Sciences, Professor of Tbilisi State Medical University, Faculty of Pharmacy, Head of The Department of Social and Clinical Pharmacy, Georgia;

⁴MD, PhD, Doctor of Medical Sciences, Professor, Director of the Scientific Research-Skills Center at Tbilisi State Medical University, Professor of the Department of Medical Pharmacology at Tbilisi State Medical University, Georgia.

⁵MD, PhD, Doctor of Medical Sciences, Professor of The Department of Dentistry at Caucasus International University; Georgia;

ABSTRACT

The microflora of the oral cavity is a set of representatives of various taxonomic groups of microorganisms that inhabit the oral cavity as a kind of ecological niche of the human body, entering into biochemical, immunological and other interactions with the microorganism and with each other. Any imbalance in this set is a harbinger of diseases of the oral mucosa. Orthopedic devices cause regular irritation of the mucous membrane. These irritations reduce the activity of oral natural resistance factors, which, in turn, causes an imbalance in the oral microflora. The successes achieved to date in the treatment of malocclusion pathology using orthodontic technology can significantly expand the indications for its use. A wealth of clinical experience has been accumulated in achieving functional and aesthetic effects in adult patients, aggravated by chronic inflammatory periodontal diseases, including those accompanied by destructive lesions. Nevertheless, studies by a number of authors indicate an increase in the percentage of complications of orthodontic treatment, the most frequent of which is an exacerbation of chronic inflammatory periodontal diseases. A kind of risk zone for exacerbation of chronic inflammatory periodontal diseases are those parts of the dentition to which force is applied. Orthodontic constructions change the relief of the dentition, significantly increase the potential area of possible adhesion of microorganisms, make it difficult to remove plaque, which prompts the search for informative criteria for monitoring the course of a chronic infectious and inflammatory process in the oral cavity under permanently acting conditions.

Keywords: Microflora, oral cavity, orthopedic structures, pathological pocket.



THE PECULIARITIES OF REMDESIVIR AND ITS OUTLOOKS FOR THE TREATMENT OF COVID-19 DISEASE

Nodar Sulashvili¹, Luiza Gabunia², Nana Gorgaslidze³

¹MD, PhD, Doctor of Theoretical Medicine in Pharmaceutical and Pharmacological Sciences, Associate Professor of Alte University, International School of Medicine, Division of Pharmacology, Tbilisi, Georgia; Invited Professor of Tbilisi State Medical University, Georgia;

²MD, PhD, Doctor of Medical Sciences, Professor, Director of the Scientific Research-Skills Center at Tbilisi State Medical University, Professor of the Department of Medical Pharmacology at Tbilisi State Medical University, Georgia.

³MD, PhD, Doctor of Pharmaceutical Sciences, Professor of Tbilisi State Medical University, Faculty of Pharmacy, Head of The Department of Social and Clinical Pharmacy, Georgia;

ABSTRACT

The aim of the study was to investigate and analyze the properties of remdesivir and its outlook in the treatment of COVID-19 disease. The antiviral remdesivir, a nucleotide analog prodrug, has a broad spectrum of activity against viruses of several families. After showing its strong antiviral activity against coronaviruses in preclinical studies, remdesivir has emerged as a drug candidate for the treatment of 2019's novel coronavirus disease (COVID-19) caused by the acute respiratory syndrome 2 (SARS-CoV-2) coronavirus infection now a worldwide pandemic. The use of remdesivir to treat COVID-19 began in early 2020 and has shown promising results so far. In 2020, many countries have conditionally approved the use of remdesivir in patients with severe COVID-19. This was followed by a rapid series of conditional approvals across countries / regions. Briefly, remdesivir has been shown to inhibit the coronavirus and improve lung function for prophylactic and therapeutic purposes (early infection) based on in vitro and in vivo data. However, data on COVID-19 patients remained limited.

The global pandemic of the 2019 novel coronavirus disease (COVID-19) caused by the acute respiratory syndrome coronavirus 2 (SARS-CoV-2) has created an urgent need for effective antiviral drugs. Remdesivir (formerly GS-5734) is a prodrug of a nucleoside analogue that is currently being investigated in clinical trials for COVID-19. Its unique structural features enable the intracellular delivery of high concentrations of the active triphosphate metabolite and avoid re-inhibiting efficiently viral RNA synthesis. In preclinical models, remdesivir has shown strong antiviral activity against a variety of human and zoonotic β -coronaviruses, including SARS-CoV-2. This article critically evaluates the available data on remdesivir, focusing on microbiology, biochemistry, pharmacology, pharmacokinetics and in vitro anticoronaviral activity, as well as on clinical experience and ongoing advances in COVID-19 clinical trials.

Keywords: Remdesivir, coronavirus, pharmacology, Covid-19, disease, treatment, outlooks.

THE SPECIFICITIES AND PHARMACOLOGICAL ACTION OF GEOMIN FORTE FOR THE COVID-PANDEMIC THERAPY

Marina Giorgobiani¹, Nana Gorgaslidze², Nodar Sulashvili³

¹MD, PhD, Doctor of Medical Sciences, Professor of Tbilisi State Medical University, Faculty of Public Health; Department of Hygiene and Medical Ecology, Georgia;

²MD, PhD, Doctor of Pharmaceutical Sciences, Professor of Tbilisi State Medical University, Faculty of Pharmacy, Head of The Department of Social and Clinical Pharmacy, Tbilisi, Georgia;



³MD, PhD, Doctor of Theoretical Medicine in Pharmaceutical and Pharmacological Sciences, Associate Professor of Alte University, International School of Medicine, Division of Pharmacology, Tbilisi, Georgia; Invited Professor of Tbilisi State Medical University, Tbilisi, Georgia;

ABSTRACT

The aim of the research was to study and analyze the specificities and pharmacological action of Geomin forte for the covid-pandemic therapy. Antioxidants are substances that the human body constantly needs in order to maintain it in a normal state, which means maintaining the necessary balance between free oxidative radicals and antioxidant forces, the role of which is played by antioxidants. Vitamin E increases the body's nonspecific resistance, and by activating the synthesis of cytokines, tocopherol stimulates its own anti-inflammatory activity. The effect of vitamin E is to stimulate the reproduction of immune cells, systems that need to quickly multiply when they meet the source of a possible disease. In the body, this process is called mitogenesis. The pharmacodynamic effects of tocopherol are synergistic when combined with vitamins C and A. Retinol provides formation of immune (protective) cells, lining respiratory tract and gastrointestinal tract, serving as a natural barrier to infection. Medicine will enhance possibilities of adaptation of the organism to the changed environment, because, in many cases, it is very difficult to protect the population from the impact of the negative factor (including ionizing radiation, natural disasters, etc.) According the study results we think that Geomin Forte will help to consider the diversity of symptoms of postcoid syndrome, and it will be quite flexible and creative to use it in the period of postcovid rehabilitation.

Keywords: Specificities, pharmacological, Geomin Forte, covid-pandemic, therapy.

TROMBOSIS IN CHILD WITH POST COVID-19 INFECTION

Nonkulovski D., Zhivkovska L., Duma F., Sofijanov A., Bojadzieva S., Kirovski I.
Muaremoska-Kanzoska L.¹, Alili-Ademi L.¹

¹University Clinic for pediatric diseases, Department of neurology, Skopje, North Macedonia.

ABSTRACT

Introduction: SARS CoV-2 infection can cause acute, as well as chronic damage to the cardiovascular system. Blood vessel dysfunction and clot formation, as suggested by elevated D-dimer levels, are thought to play a significant role in morbidity, as well as in mortality in Covid-19 patients, leading to clots causing pulmonary embolisms and ischemic events within the brain.

Aim: To confirm the correlation between SARS CoV-2 infection and possibility for vascular complication, including thrombotic brain lesion¹.

Materials: Detailed patient's history, physical examination particularly noting the neurological status and locomotor skills, as well as blood analysis with hemostasis and d-dimers, serology for SARS CoV-2 IgG antibodies and PCR swab were all part of the diagnostic process for this patient.

Methods: Computed tomography and brain MRI with angiography were main imaging tools used in the diagnostic process.

Results: Thrombosis of the left middle cerebral artery was confirmed on brain MRI with angiography in a patient recovered from SARS CoV-2 infection, noted with high levels of IgG



antibodies to the particular virus and elevated D-dimer levels, presenting with symptomatic right sided hemiparesis.

Conclusion: Some of the patients recovered from SARS CoV 2 infection can develop ischemic stroke. This link is confirmed by elevated levels of IgG antibodies in patient's serum against SARS CoV-2. This kind of vascular post viral complication can cause different kind of disability, presented with neurological impairment and coagulation disorders. The prognosis is improving with early started anticoagulant and physical therapy.²

Keywords: Thrombosis, SARS Cov-2, Brain, Hemiparesis.

FEATURES OF THE CURRENT AND CLINICAL CLASSIFICATION OF THE ACTIVE VARIANT OF KANDINSKY-CLERAMBO SYNDROME IN THE CLINIC OF SCHIZOPHRENIA

Bilal Asadov, Nasimi Vahabov

Department of Psychiatry, AMU.

ABSTRACT

This work is based on a generalization of the results of a clinical, psychopathological, and follow-up study of 203 patients with various types of schizophrenia, in whom the psychopathological phenomena of the classical and active variants of Kandinsky-Clerambo syndrome acted as the leading psychopathological disorder in the clinical picture. The basis of our proposed systematics of the active variant of Kandinsky-Clerambo syndrome is based on four criteria: a) the severity (detailed, non-expanded) and the psychopathological structure of the syndrome, depending on the prevalence of certain disorders (delusional, pseudo-hallucinatory, manifold, depressive, with fantastic content); c) the direction of exposure (auto- and heteroactive); d) features of progressive development (progredient, regredient and stationary) of the active variant of Kandinsky-Clerambo syndrome. The study revealed that the clinical features of the active variant of the Kandinsky-Clerambo syndrome are in a certain dependence on the type and form of the course of schizophrenia. The prognostic value of the psychopathological phenomena of the active variant of the Kandinsky-Clerambo syndrome is determined by its integrity, the stage of the disease at which it formed, the features of its relationship with the classic version of the Kandinsky-Clerambo syndrome.

Keywords: schizophrenia, type of course, active variant of Kandinsky-Clerambo syndrome, typology, prognostic value.

THE MOST COMMON MISTAKES MADE IN THE MANAGEMENT AND TREATMENT OF PATIENTS WITH SEVERE COVID-19

Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Satenov J.K., Zhankulov M.H., Jienalin R.N., Musina N.A.

NJCK "West Kazakhstan Medical University named after Marat Ospanov", Aktobe, Kazakhstan.

ABSTRACT



The outbreak of the coronavirus disease COVID-19 poses a serious threat to health. The continuing number of COVID-19 cases worldwide pushes us to analyze the treatment, diagnosis, and management of these patients. In this article, we reviewed the most common mistakes made in the management and treatment of patients with severe COVID-19.

At the outpatient level, the most common mistakes in the management and treatment of patients with severe COVID-19 are:

- long-term non-treatment of patients for medical care, self-treatment at the outpatient level, leading to late treatment at the polyclinic already in medium-severe and serious condition,
- late diagnosis of the onset of the disease, leading to a severe course of the disease, with the addition of complications,
- inadequate monitoring of the condition of patients at the outpatient level,
- underestimation of the condition of patients at the outpatient level with remote monitoring, leading to late hospitalization,
- delayed diagnosis of pneumonia, which can lead to the progression of the process and the untimely start of treatment.

Starting with polyclinics and ambulances, a routing scheme for patients with suspected COVID-19 should be clearly worked out.

Often there are unjustified overtransportation of patients between dispensary and infectious hospitals.

When hospitalized in a hospital, there are:

- during hospitalization, underestimation of the severity of patients with suspected COVID-19 is allowed, as a result of which there is a late transfer to the ICU with the progression of the process, with the addition of complications and not timely initiation of intensive therapy in full with adequate oxygen therapy, connection of full-fledged symptomatic therapy, which significantly reduces the prognosis of the disease,
- full monitoring of the patient's condition is not carried out with adequate measurement of blood saturation, diuresis (doctors do not always take into account the frequency of acute renal injury in COVID-19 - 29%), body temperature, the state of the body's water, electrolyte, protein balance,
- often there are inadequate oxygen therapy regimens, late transfer to non-invasive ventilation of the lungs, artificial ventilation of the lungs,

In addition, there are observed in the hospital not conducting timely consultations, consultations of the necessary specialized specialists (cardiologists, endocrinologists, therapists, neurologists, nephrologist, psychologist and others). The purpose of such consultations is to make the right decisions, to choose an individual strategy for a particular patient.

During the discussion, doctors of different profiles solve the problems they specialize in, discuss critical problems of diagnosis and treatment. The final decision on the management of the patient is made taking into account all discussions, various opinions and advice.

Our experience shows that the work of a multidisciplinary team can sufficiently improve the effectiveness of diagnosis and treatment of COVID-19 in the ICU.

The most common mistakes made in the management and treatment of pregnant women and COVID-19:



- insufficient or lack of information in pregnant women about the symptoms of COVID-19 and the correct actions when they appear,
- carrying out insufficient explanatory work on the prevention of COVID-19 in pregnant women,
- insufficient observance of quarantine rules by pregnant women: not to visit crowded places without the need, wearing masks when visiting polyclinics and public places, observing social distance, strict observance of personal hygiene rules,
- formal remote monitoring of pregnant women often takes place,
- the issue of transferring pregnant women to a higher level of regionalization is not being resolved in a timely manner,
- CT scans of the lungs are not carried out in a timely manner against the background of negative dynamics of the course of the disease,
- the decision to carry out an early delivery is not made in a timely manner with a relatively stable condition, but with a critical deterioration of the woman,
- the adopted tactics of delivery are often carried out already against the background of the progression of the critical condition of a pregnant woman and without sufficient stabilization of the condition, as a result of which delivery worsens the condition and outcomes of the disease.

Factors that reduce mortality may be the following provisions:

- the effectiveness of stabilization measures that affect the severity of the disease and its severity or its severity (isolation and quarantine),
- the coronavirus is becoming less dangerous,
- the virus mutates and its viral load also decreases,
- improved diagnosis and treatment,
- the emergence of new drugs,
- expansion of knowledge about the virus, exchange of experience.

Keywords: medical care, self-treatment, outpatient level.

ОСОБЕННОСТИ ФИЗИЧЕСКОГО И ПОЛОВОГО РАЗВИТИЯ ДЕВОЧЕК С ЗАДЕРЖКОЙ УМСТВЕННОГО РАЗВИТИЯ

**Асадов Билал¹, Вагабов Насими¹, Исмаилова Арзу², Асадова Шафаг², Вагабова
Шарифа², Амирасланова Шефа²**

¹Кафедра психиатрии Азербайджанского Медицинского Университета.

²Кафедра акушерства и гинекологии Азербайджанского Медицинского Университета.

Актуальность проблемы: Процесс формирования органов репродуктивной системы в периоде полового созревания определяет функциональную активность этой системы в последующие годы жизни. В пубертатном периоде последовательное развитие вторичных половых признаков и становления менструальной функции происходит на фоне физического развития девочки, что определяет состояние и функциональную активность репродуктивной системы в последующие годы жизни [1,6,10].

Учитывая актуальность проблемы, а также необходимость изучения особенностей течения периода полового созревания девочек с различными соматическими заболеваниями в анамнезе, была определена цель настоящего исследования.



Установлено, что среди подрастающего поколения особенности психического развития девочек влияют на состояние физического и полового развития [7,8,9]. В свою очередь особенности периода полового созревания определяют процесс психологической адаптации девочек в периоде становление органов репродуктивной системы. Научные исследования, посвященные взаимовлиянию физического, полового и психического развития, являются ограниченными и определяют настоятельную необходимость в проведении научных исследований в этом направлении.

Целью данного исследования была изучение особенностей течения периода полового созревания девочек с задержкой умственного развития.

FEATURES OF STUDYING THE NEEDS OF PATIENTS WITH SCHIZOPHRENIA AND THEIR FAMILY MEMBERS IN THE CONTEXT OF THE BIOPSYCHOSOCIAL APPROACH

Jamilya Ismailova¹, Bilal Asadov²

¹Mental Health Center of the Ministry of Health, ²Department of Psychiatry of the Azerbaijan Medical Institute

ABSTRACT

This publication is a review of materials devoted to the need to study the needs of patients with schizophrenia, as well as their family members, in the context of a biopsychosocial model. The importance of studying the burden of disease on family members of the patient, as well as satisfaction with services in terms of assessing the final results, is emphasized. Recommendations are given on the use of appropriate scales to determine needs.

Keywords: schizophrenia, needs, family members, services.

THE VALUE OF LACTATE IN THE BLOOD IN ASSESSING THE PROGNOSIS OF THE DISEASE IN PATIENTS WITH ACUTE NEUROPATHOLOGIES

Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Tleuova A.S., Kalieva B.M., Daniyarova K.R., Zhumagaliev E.K.

West Kazakhstan Medical University named after Marat Ospanov, Kazakhstan

ABSTRACT

This study is devoted to the study of the prognostic value of the indicator of cerebral metabolism – lactate in assessing the prognosis of the disease in patients with acute neuropathologies.

The purpose of the study: To study the prognostic role of the indicator of cerebral metabolism – lactate as a predictor of mortality in patients with acute neuropathologies.

Materials and methods: A prospective cohort study involving 112 patients with traumatic brain injuries and acute disorders of cerebral circulation. Brain metabolism was studied with the determination of lactate and blood glucose, cerebral gas exchange and oxygenation data (rSO₂, AVDO₂), neuron-specific markers (S100β, NSE) and the GCS integral scale, acid-base state and



blood gas composition. The study was carried out at the stages of admission of the patient to the hospital and in dynamics on the 3rd, 5th and 7th days of treatment.

Results: A sharp increase in the level of lactate in the blood is a constant predictor of secondary cerebral damage with ischemia and hypoxia of the brain. A statistically significant threshold value or cut-off point for lactate >3.3 mmol/l was determined to divide patients into groups with favorable and unfavorable outcomes by variance logistic regression analysis (LRA). The results of the LRA analysis indicate the presence of a statistically significant direct relationship between lactate and pH <7.3 - odds ratio (OR) 12 (95% CI: 3.26-42.39), $p=0.0002$; with an increase in blood glucose above 8.9 mmol/l - OR 6.22 (95% CI: 2.71-14.21), $p<0.0001$; with SAD ≥ 179 mmHg - OR 3.89 (95% CI: 1.60-9.43), $p=0.0002$; with S100 β <0.3 mcg/l OR - 2.12 (95% CI: 0.86 - 5.24), $p=0.1025$; with NSE ≥ 15 ng/l, OR 3.43 (95% CI: 1.37 - 8.57), $p=0.0083$; GCS < 10 points - OR 2.87 (95% CI: 1.18 - 6.99), $p=0.0734$. The best predictive value of the model had a cut-off point of 94.11%, AuROC - 0.878; sensitivity - 78.85%; specificity - 85.03%; negative test value - 92.81%; positive test value - 62.12%. As the results of studies have shown, with an average lactate value > 3.3 mmol / l, the relative risk of an unfavorable outcome on the 1st day of the disease in patients increases by 9.19 (95% CI: 3.44 - 24.60), $p<0.0001$.

To predict the quantitative indicator of lactate, multiple regression analysis with independent variables (glucose, AVDO₂, S100 β , NSE, GCS, pO₂, rSO₂). Model quality: $R^2 = 33\%$; R^2 (adjusted) = 31%; $p<0.0001$. This model can be used to predict the outcome in patients with acute neuropathology.

Keywords: lactate, strokes, traumatic brain injury, prognosis.

МУЛЬТИМОДАЛЬНОЕ ОБЕЗБОЛИВАНИЕ ПРИМЕНЕНИЯ АНАЛЬГЕТИКА ДЕКСАЛЬГИНА НА ЭТАПЕ ПРОВЕДЕНИЯ АНЕСТЕЗИОЛОГИЧЕСКОГО ПОСОБИЯ В ЭКСТРЕННОЙ ХИРУРГИИ

Чынгышова Ж.А., Тилеков Э.А., Апиева Э.И.

Кыргызская государственная Медицинская Академия имени И.К. Ахунбаева,
Национальный Хирургический центр имени М.М. Мамакеева. г. Бишкек Кыргызстан.

Цель исследования: Обоснованность мультимодального обезболивания применения анальгетиков дексальгина во время анестезиологического обезболивания у экстренных хирургических больных.

Материал и методы: Дексальгин применялся до 30 минут до операции или до окончания операции за пол часа общей анестезии и послеоперационного обезболивания в качестве мультимодального анальгетического компонента при обширных абдоминальных операциях у 50 больных в возрасте 28-68 лет (в среднем $58,08 \pm 1,01$ года). Мужчин было 17, женщин 33. Продолжительность операций составила от 40 до 330 мин (в среднем 146.4 ± 0.86 мин). Для премедикации дексальгин использовали внутримышечно в дозе $0,032 \pm 0,003$ мг/кг, в сочетании с диазепамом ($0,153 \pm 0,005$ мг/кг) и атропином (0,01 мг/кг). На этапе седации перед интубацией трахеи применяли седуксен ($0,27 \pm 0,015$ мг/кг) проведение низкпоточной ингаляционной анестезии севораном.



Протокол анестезии: Индукция севофлураном в дозе 6-8% об. Миоплегия для интубации трахеи - дитилин 0,5мг/кг. Поддержание анестезии - севофлуран 1,5 - 3,0 % об + аналгезия фентанилом 2 - 4мг/кг/ч дробно Искусственную вентиляцию легких проводили по объему аппаратом АСОМА кислородновоздушной смесью в соотношении 1:1 с РЕЕР - 4-5 см.вод.ст. и потоком газовой смеси не более 1,5-2 л/мин. Миорелаксацию поддерживали введением ардуан в дозе 0,1 мг/кг/ч. Поддержание 53 общей анестезии осуществляли фракционным введением фентанила в сочетании с ингаляцией O₂ (50-66%), причем доза фентанила прогрессивно уменьшалась с течением операции: 1й час-0,021±0,004 мг/кг, 2й и 3й часы соответственно-0,0055±0,0007 мг/кг. Для послеоперационного обезболивания дексалгин применяли в дозе 100 мг (0,030±0,003 мг-кг в 1-е сутки и 0,043±0,006 мг-кг на 2-е сутки). Оценку эффекта дексальгина проводили по общепринятым методикам. Осуществлялся мониторинг и в 3 стандартных отведения ЭКГ. Данные отображались на мониторе «Мендрей» Состояние метаболизма и газообмена оценивали по показателям кислотно-основного состояния (КОС) крови на аппарате «Simens T500 (США)». Степень седативного эффекта оценивали по 3-балльной шкале Спилберга: 0-отсутствие седации, 1-слабая, 2-умеренная, 3-чрезмерная. Показатели внешнего дыхания определяли по спирограмме аппаратом «Монитор Мендрей/

Результаты и обсуждение: Мультиmodalное обезболивание дексальгина в сочетании с севораном и общей тотальной внутривенной анестезии во всех случаях обеспечивала вполне полноценный седативный эффект, состояние при стабильных артериальном давлении (АД) и частоте сердечных сокращений (ЧСС). Послеоперационных болевых синдромов, без клинических признаков депрессии дыхания и закономерных изменений АД и ЧСС. При изучении на фоне мультиmodalного сочетанного действия дексальгина и севорана, внутривенной тотальной анестезии интубация трахеи на фоне миорелаксации дитилином не сопровождалась существенными сдвигами показателей системы кровообращения: ЧСС после интубации 83,9±2,66 в минуту, перед интубацией 81,8±2,28 в минуту ($p>0,05$), АД систолическое 138,6±3,9 и 133,6±4,53 мм рт. ст., АД диастолическое 86,8±2,60 и 83,8±2,52 мм рт. ст. соответственно ($p>0,05$). Течение анестезии во всех случаях было стабильным. АД и ЧСС после разреза кожи не изменялись, а на наиболее травматичном этапе операции закономерно не отличались от исходных и примерно на 10% превышали показатели, зарегистрированные после вводного наркоза не посредственно перед началом операции. Дыхательный компонент КОР в условиях ЦВД закономерно не изменялся. Осложнений при выведении больных из анестезии и случаев посленаркозной депрессии дыхания и сознания не отмечалось. Послеоперационное обезболивание дексальгином начинали, не дожидаясь развития сильного болевого синдрома, что является важным фактором поддержания постоянства гомеостаза в послеоперационном периоде и способствует достижению лучших результатов обезболивания при тенденции к снижению доз анальгетиков. При мультиmodalной тактике обезболивания продолжительность действия дексальгина в дозе 100 мг составила 8,40±1,65 ч. В контрольной группе больных, у которых обезболивание проводили промедолом (средняя доза на одного больного составила 6,12 мг в сутки, т.е. около 1 мг/кг), аналогичный дексальгину обезболивающий эффект от одной дозы продолжался в среднем 6,89±0,72 ч, т. е. был почти в 2,5 раза короче, чем у 100 мг трамадола. По данным электрокожной сенсометрии порог болевого ощущения через 1 ч после внутримышечного введения 100 мг дексальгина закономерно возрастал с 2,67±0,41 до 4,11 ±0,55 мА.



Вывод: на примере данного клинического наблюдения продемонстрирован наиболее эффективный рациональный и безопасный метод мультимодального обезболивания проведения общей анестезии у экстренных хирургических пациентов.

Ключевые слова: Мультимодальное обезболивание дексальгина, Дыхательный компонент КОР, ЦВД.

THE INCIDENCE OF PNEUMONIA IN PATIENTS WITH ACUTE CEREBRAL CIRCULATORY DISORDERS

Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Tleuova A.S.,
Kalieva B.M., Daniyarova K.R., Zhumagaliev E.K., Musina N.A.

West Kazakhstan Medical University named after Marat Ospanov, Kazakhstan

ABSTRACT

The risk of developing pneumonia in acute disorders of cerebral circulation is significantly higher than in many critical conditions. The development of pneumonia in patients with strokes significantly worsens the clinical course and prognosis of the disease, prolongs hospital stays and increases overall mortality. Risk factors for the development of pneumonia are: age over 65 years, severe cerebral deficiency with extensive heart attacks and hemorrhages in the brain, often concomitant diseases (COPD, coronary artery disease, hypertension, hyperglycemia, and others) (Aslanyan S., Weir C.J., Diener H-C. et al., 2004). In stroke patients over the age of 65, the presence of even one of these factors makes it possible to predict the development of pneumonia with high sensitivity and specificity.

The aim of the study was to assess the incidence of pneumonia in patients with acute cerebral circulatory disorders

Materials and methods of the study: a retrospective analysis was carried out in 754 patients who were treated at the stroke center for the period from 2016 to 2019. The diagnosis of pneumonia was confirmed in 13.8% (104) of patients, 50.96% of them were men (49) and 57.2% of women (55). The average age of patients was 63.25 ± 14.8 years (23-95 years). Ischemic stroke was diagnosed in 62.1% (64) of patients, hemorrhagic stroke - in 38.8% (40). The median average stay of patients in the intensive care unit was 10 days.

Results: Studies revealed the presence of right-sided pneumonia in 31.7%, left-sided pneumonia in 37% and bilateral pneumonia in 32.7% of patients. The development of pneumonia was diagnosed on an average of 4 ± 1.1 days of stroke.

Community-acquired aspiration pneumonia was exposed in 19.2% of cases after a documented episode of massive aspiration with gastric contents. These patients were admitted with deep depression of consciousness up to 20 points on NIHSS and convulsions. Clinical reliable manifestations correlating with the development of pneumonia were leukocytosis ($r = 0.217$, $p < 0.05$), hyperthermia over 38.7 degrees ($r = 0.412$, $p < 0.05$), the presence of radiological ($r = 0.163$, $p < 0.05$) and tomographic manifestations of pneumonia ($r = 0.322$, $p < 0.05$).

When conducting statistical processing with the calculation of the Spearman correlation coefficient in order to identify the influence of various clinical and resuscitation factors on the development of



pneumonia, it was revealed: a direct correlation ($r = 0.191$, $p < 0.05$) between the earlier start of ventilation in patients with a reduced left ventricular ejection fraction. A negative correlation ($r = -0.641$, $p < 0.05$) was revealed for the pair – left ventricular ejection fraction / age of the patient. Due to the risk of developing ventilator-associated pneumonia, patients were divided into groups. There were 57 (54.8%) patients who did not undergo ventilation, 22 (21.1%) patients who received therapy for less than 3 days, and 35 (33.6%) people who received ventilation support for more than 3 days. In 31 (29.8%) cases, pneumonia developed in patients with a ventilator duration of more than 3 days, and only 4 (3.8%) patients of this group had no pneumonia. This pattern is characterized by the average binding strength according to the criterion ϕ (0.36; $p < 0.001$). In patients with a ventilator duration of less than 3 days, pneumonia did not develop more often. Correlation analysis revealed that the risk of developing pneumonia is higher in patients who are on a ventilator for more than 3 days ($r = 0.289$; $p = 0.001$).

Conclusion: Significant predictors of the development of pneumonia in stroke patients are age, hyperthermia, leukocytosis, auscultative signs and the presence of severe background pathology of the cardiovascular system.

Keywords: stroke, frequency of pneumonia, age, hyperthermia, leukocytosis,

ПРЕДЕЛЬНЫЙ УРОВЕНЬ ЛАКТАТА В КРОВИ И ПРОГНОЗ НЕБЛАГОПРИЯТНОГО ИСХОДА ПРИ ВТОРИЧНЫХ ПОРАЖЕНИЯХ ГОЛОВНОГО МОЗГА

Саркулова Ж.Н., Токшилыкова А.Б., Саркулов М.Н., Тлеуова А.С., Калиева Б.М.,
Даниярова К.Р., Жумагалиев Е.К.,

Западно-Казахстанский медицинский университет имени Марата Оспанова, Казахстан.

РЕЗЮМЕ

Данное исследование посвящено изучению прогностической ценности показателей церебрального метаболизма – лактата как показателей исхода повреждений мозга.

Цель исследования: Изучить прогностическую роль показателей церебрального метаболизма – лактата в качестве предиктора смертности при сосудистых и травматических повреждениях головного мозга.

Материалы и методы: Проспективное когортное исследование с участием 219 пациентов. Исследовали церебрального газообмена и оксигенации, метаболизм мозга и артериовенозная разница по кислороду, нейронспецифические маркеры (S100, NSE) и интегральная шкала GCS, кислотно-основное состояние и газовый состав крови были получены в периоды наблюдения: при поступлении, на 3-и, 5-е и 7-е сутки пребывания больных в отделении реанимации.

Результаты: Резкое повышение уровня лактата в крови является постоянным предиктором вторичных церебральных повреждений с ишемией и гипоксией головного мозга. Для разделения на группы больных с благоприятным и неблагоприятными исходами дисперсионным анализом определено статистически значимое пороговое значение или точка



отсечения для лактата $>3,3$ ммоль/л. Результаты анализа ЛРА свидетельствуют о наличии статистически значимой прямой связи между лактатом и $pH < 7,3$ - отношение шансов (ОШ) 12 (95% ДИ: 3,26-42,39), $p=0,0002$; при повышении глюкозы крови выше 8,9 ммоль/л - ОШ 6,22 (95% ДИ: 2,71-14,21), $p<0,0001$; при увеличении САД ≥ 179 мм.рт.ст ОШ 3,89 (95% ДИ: 1,60-9,43), $p=0,0002$; при $S100\beta < 0,3$ мкг/л ОШ- 2,12 (95% ДИ: 0,86 - 5,24), $p=0,1025$; при $NSE \geq 15$ нг/л ОШ 3,43 (95% ДИ: 1,37 - 8,57), $p=0,0083$; GCS < 10 баллов ОШ 2,87 (95% ДИ: 1,18 - 6,99), $p=0,0734$. Наилучшую прогностическую ценность модели имела точка отсечения 94,11%, AuROC-0,878; Se-78,85%; Sp-85,03%; NPV-92,81%; PPV-62,12%.

Для прогнозирования количественного показателя лактата, множественным регрессионным анализом с независимыми переменными (глюкоза, $AVDO_2$, $S100\beta$, NSE, GCS, PO_2 , cSO_2).

Качество модели: $R^2 = 33\%$; R^2 (скоррект.)= 31%; $p<0,0001$. Как показали результаты исследований, при среднем значении лактата $>3,3$ ммоль/л относительный риск неблагоприятного исхода в 1-е сутки заболевания у больных возрастает на 9,19(95% ДИ: 3,44 - 24,60), $p<0,0001$.

Данная модель может быть использована для прогнозирования исхода у больных с острой церебральной патологией.

Ключевые слова: инсульты, травматические повреждения мозга, церебральная оксиметрия, диагностические и прогностические критерии, исход инсультов.

ULTRASONIC DEVICE WITH A TEMPORARY AUTOMATIC ADJUSTMENT GENERATOR

Aynur Jabiyeva
ASOIU, Azerbaijan

ABSTRACT

All audible and inaudible sound oscillations propagate to the environment as mechanical oscillations, having the property of waves. When sound propagates, positive and negative pressures occur at a frequency equal to its frequency. Sound waves propagate in the same straight direction and are reflected and absorbed in the environment. The speed of propagation of ultrasonic waves varies in different environments, that is, the denser the medium, the higher the speed of propagation. Ultrasound treatment is carried out using special advanced devices. Ultrasonic vibrations in modern devices are obtained by piezoelectric effect.

Keywords: sound vibrations, ultrasonic waves, piezoelectric effect, ultrasonic physics, amplifiers, voltage, current, ultrasonic scanner, automatic adjustment generator, adiabatic rotation sequence, apodization.



ROLE OF HEALTHCARE SERVICES

Nana Jikia

Davit Agmashenebeli Academy, Professor.

ABSTRACT

One of the key factors that determines the wealth of the nation is the health of its citizens. Healthcare is an essential need of the society as injuries, illness and emergencies requires hospitals to identify, treat and effectively manage all these occurrences. It is a fact that without healthier, longer and happier life, it is hard to manage the desires and aspirations of people.

The entire healthcare industry gets bifurcated into various areas to fulfill the health requirements of population at large. Throughout the world, the services provided by the healthcare industry will thrive and expand till the time man survives on this planet. This makes this industry an enormous element of the economy of a country.

The World Health Organization has described health policy as a series of plans, actions and decisions made and carried out to accomplish specific healthcare related goals in any society. The fundamental objective of these policies is to set a vision for coming years to establish reference points and targets for the small as well as medium term.

Health care is defined as any task undertaken to enhance the physical, social and mental state of people. It includes a wide range of activities that includes disease prevention, health promotion, comforting and long-term care and creative care rehabilitation. Healthcare services helps in maintaining as well as restoring health of a person by means of any treatment or disease prevention.

Healthcare is an enterprise or a field that is concerned with equipment information, and supply of services for the restoration and upkeep of health of a person. It is mandatory for a professional who has been assigned the task to provide healthcare services to be licensed and trained.

It goes for all departments of healthcare such as medicine, clinical psychology, public health and dentistry. A healthcare provider who delivers healthcare services can be an institution or an individual that offer curative, preventive, rehabilitative and promotional healthcare services systematically to families, communities and individuals.

Before taking any healthcare service, it is very important for people to know who is paying for these services. One of the ways is through government funds. These funds assist people who have low incomes. Such programs are normally called Medicaid and Medicare. Medicare programs are nationalized programs that are executed by the government who is responsible to funding eligible individuals.

These programs provide coverage to people who are 65 or more than 65 years of age. Also, people who are below 65 years but have some disabilities like last stage renal stage illness, can benefit by this program. Medicare services provide services in 3 parts. The first part aids in covering inpatient care and nursing facility.

The second part covers outpatient care, preventive services and service offered by a physician. The last part covers the entire cost incurred on prescription drugs. Medicaid healthcare service, is meant for people who falls under low income groups and can't afford healthcare insurance. Medicaid programs typically cover outpatient and inpatient services, long term care and physician services.

Keywords: healthcare, wealth, injuries, illness.



TABLE OF CONTENTS

Leartha Alili Ademi, MD, Blerim Ademi, MD

EPILEPSY IN CHROMOSOMAL DISORDERS: LITERATURE REVIEW OF SEIZURE TYPES, EEG FINDINGS AND TREATMENT 10

Билал Асадов, Насими Вагабов

ВЛИЯНИЕ ПАНДЕМИИ КОВИД-19 НА ГОРМОНАЛЬНЫЙ СТАТУС И ПСИХИЧЕСКОЕ ЗДОРОВЬЕ ЖЕНЩИН 10

Nodar Sulashvili, Kakhaber Robakidze, Nana Gorgaslidze, Luiza Gabunia, Lela Grigolia

SOME MICROBIOLOGICAL MARKERS OF THE ORAL CAVITY OF ORTHOPEDIC PATIENTS 11

Nodar Sulashvili, Luiza Gabunia, Nana Gorgaslidze

THE PECULIARITIES OF REMDESIVIR AND ITS OUTLOOKS FOR THE TREATMENT OF COVID-19 DISEASE 12

Marina Giorgobiani, Nana Gorgaslidze, Nodar Sulashvili

THE SPECIFICITIES AND PHARMACOLOGICAL ACTION OF GEOMIN FORTE FOR THE COVID-PANDEMIC THERAPY 12

Nonkulovski D, Zhivkovska L, Duma F, Sofijanov A, Bojadzieva S, Kirovski I,

Muaremoska-Kanzoska L, Alili-Ademi L

TROMBOSIS IN CHILD WITH POST COVID-19 INFECTION 13

Bilal Asadov, Nasimi Vahabov

FEATURES OF THE CURRENT AND CLINICAL CLASSIFICATION OF THE ACTIVE VARIANT OF KANDINSKY-CLERAMBO SYNDROME IN THE CLINIC OF SCHIZOPHRENIA 14

Zhanslu Sarkulova, Ainur Tokshilykova, Marat Sarkulov, Zhusupbek Satenov,

Zhankulov M.H., Jienalin R.N., Musina N.A.

THE MOST COMMON MISTAKES MADE IN THE MANAGEMENT AND TREATMENT OF PATIENTS WITH SEVERE COVID-19 14

Асадов Билал, Вагабов Насими, Исмаилова Арзу, Асадова Шафаг, Вагабова Шарифа, Амирасланова Шефа

ОСОБЕННОСТИ ФИЗИЧЕСКОГО И ПОЛОВОГО РАЗВИТИЯ ДЕВОЧЕК С ЗАДЕРЖКОЙ УМСТВЕННОГО РАЗВИТИЯ 16

Jamilya Ismailova, Bilal Asadov

FEATURES OF STUDYING THE NEEDS OF PATIENTS WITH SCHIZOPHRENIA AND THEIR FAMILY MEMBERS IN THE CONTEXT OF THE BIOPSYCHOSOCIAL APPROACH 17

Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Tleuova A.S., Kalieva B.M., Daniyarova K.R., Zhumagaliev E.K.

THE VALUE OF LACTATE IN THE BLOOD IN ASSESSING THE PROGNOSIS OF THE DISEASE IN PATIENTS WITH ACUTE NEUROPATHOLOGIES 17

Чынгышова Ж.А., Тилеков Э.А., Апиева Э.И.

МУЛЬТИМОДАЛЬНОЕ ОБЕЗБОЛИВАНИЕ ПРИМЕНЕНИЯ АНАЛЬГЕТИКА ДЕКСАЛГИНА НА ЭТАПЕ ПРОВЕДЕНИЯ АНЕСТЕЗИОЛОГИЧЕСКОГО ПОСОБИЯ В ЭКСТРЕННОЙ ХИРУРГИИ 18



Sarkulova Zh.N., Tokshilykova A.B., Sarkulov M.N., Tleuova A.S., Kalieva B.M., Daniyarova K.R., Zhumagaliev E.K., Musina N.A.	
THE INCIDENCE OF PNEUMONIA IN PATIENTS WITH ACUTE CEREBRAL CIRCULATORY DISORDERS	20
Саркулова Ж.Н., Токшилыкова А.Б., Саркулов М.Н., Тлеуова А.С., Калиева Б.М., Даниярова К.Р., Жумагалиев Е.К.,	
ПРЕДЕЛЬНЫЙ УРОВЕНЬ ЛАКТАТА В КРОВИ И ПРОГНОЗ НЕБЛАГОПРИЯТНОГО ИСХОДА ПРИ ВТОРИЧНЫХ ПОРАЖЕНИЯХ ГОЛОВНОГО МОЗГА	21
Aynur Jabiyeva	
ULTRASONIC DEVICE WITH A TEMPORARY AUTOMATIC ADJUSTMENT GENERATOR	22
Nana Jikia	
ROLE OF HEALTHCARE SERVICES	23

Organizers of the conference:

MTÜ. The International Center for Research Education & Training. (Estonia, Tallinn).
LTD The Southern Caucasus International Academy of Modern Sciences. (UK, London).
LTD. Aspendos-Academy. International Academy of Medical and Social Sciences. (UK, London).
WKMU Marat Ospanov (Kazakhstan, Aktobe)
Tugay Pharmacy Company (Azerbaijan, Baku)

Invited organizations:

Izmir Tepejik Training & Research Hospital. (Turkey)
Azerbaijan Medical University (Azerbaijan)
Tbilisi State Medical University (Georgia).
Semey Medical University (Kazakhstan, Semey).
Kyrgyz State Medical Academy named after I. K. Akhunbaev. (Kyrgyzstan)
National Surgical Center named after M.M. Mamakeev. (Kyrgyzstan)
David Agmashenebeli Academy. (Georgia)
Al-Farabi Kazakh National University. Faculty of Medicine and Health care Higher School of Medicine.
NGO Education Support & Investment Fund (Georgia, Tbilisi)
Teaching University Millennium (Georgia)
New Vision University (Georgia)

©**Publisher:** NGO International Center for Research, Education and Training.
MTÜ Rahvusvaheline Teadus-, Haridus- ja Koolituskeskus.
Management Board Member: Seyfulla Isayev.

©**Publisher:** NGO Azerbaijan International Diaspora Center in Georgia.
Deputy of director: Aytan Huseynova.

©**Editorial office:** Narva mnt 5, 10117 Tallinn, Estonia.

©**Typography:** NGO International Research, Education & Training Center. The Baltic Scientific Journals.

Registered address: Narva mnt 5, 10117 Tallinn, Estonia.

Telephones: +994 55 241 70 12; +994 51 864 88 94; +994 70 375 70 12;

Website: <https://scia.website/>

E-mail: gulustanbssjar@gmail.com, sc.mediagroup2017@gmail.com

E-ISBN:

DOI suffix: 10.36962/MHPAS07



This book consist
with 26 pages



**THE SEVENTH INTERNATIONAL SCIENTIFIC – PRACTICAL VIRTUAL CONFERENCE IN
MODERN MEDICINE AND HEALTH: PROGNOSIS, ACHIEVEMENT AND CHALLENGES**

CONFERENCE PROCEEDINGS

AZERBAIJAN-ESTONIA-KAZAKHSTAN-TURKEY

ESTONIA, TALLINN APRIL 29-30, 2022