THE CRYOAPHERESIS IN THE PATENTS' COMPLEX THERAPY WITH THE INITIAL CHRONIC PYELONEPHRITIS

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The chronic pyelonephritis is being played the leading role in the renal diseases structure. The traditional conservative therapy is not infrequently, which is insufficiently efficient, especially at the patients with the chronic pyelonephritis recurrent forms, and also, as with the intolerance, well as with the medicamental therapy low level efficiency.

The Research's Aim

It is necessary to be given the cryoapheresis efficiency general clinical assessment at the patients with the initial chronic pyelonephritis.

The Research's Material and Methods

It has been carried out the 84 patients' research with the initial chronic pyelonephritis at the age of from 18 up to 72 years. The 44 patients have been made up the researching group, having received the course medical treatment by the cryoapheresis, in combination with the traditional medicamental therapy. The rest of 40 ones have been made up the control group, where the only medicamental therapy has been used. Thus, the cryoapheresis has been carried out in the specially equipped room of the extracorporeal therapy department.

The chronic pyelonephritis clinical and the traditional biochemical parameters have already been included into the medical treatment efficiency assessment. The kidneys function ultrasonic and the radionuclide researches have been carried out. So, the microcirculation, the immunity indices and the blood laboratory indices, and also the urine states have been estimated.

The Received Results

The course cryoapheresis inclusion into the patients' complex therapy by the chronic pyelone-phritis has been had the expressed anti – inflammatory effect with the quicker clinical symptoms dynamics. The β_2 – microglobulin lowering had been taken its place just after the first procedure for 14–17% under the cryoapheresis influence, and after that, this kind of tendency was being kept on, and this index normalization has been happened to the medical treatment end. The radiopharmaceutical effective half – life (HL) shortening has been revealed, by the renal dynamic scintigraphy results. Thus, it has been shortened from c 26.8 ± 6.7 down to 12.5 ± 1.1 minutes (e.g. p < 0.05) in the researched group. At this time, the lowering has

been taken its place only from 26.3 ± 7.4 down to 21.0 ± 5.3 minutes in the control group. The cryoapheresis has been had and the detoxification effect by the intoxication leukocytic index indicators, the average molecules level concentration in the blood. So, the average molecules level has, reliably, been decreased under the cryoapheresis influence in 2.4 ± 0.2 times, whereas at the patients, having received only the medicamental therapy, it has been fallen – for 30.3 ± 3.4 %; then, the leukocytic index has been decreased down, as for 40.0 ± 5.3 %, well as for 23.8 ± 2.2 %.

The Conclusions. The cryoapheresis carrying out at the patients with the initial chronic pyelonephritis against the standard therapy against the background has been had the more expressed clinical effect with the biochemical parameters quick stabilization and also the kidneys functional state restoration.

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STRESS AND ANXIETY IN PATIENTS WITH DIABETES MELLITUS

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Nowadays more and more attention goes to research the role of psychological and social factors of progress and diabetes mellitus flow. As the rule appearing psychological problems develops because of chronic stress, caused by burden of bad endocrine disease.

In our research 44 people sick with diabetes mellitus were researched about indicators of levels reactive and personality alarm, calculated with scale of Spilberger (STAI). 28 patients (63 %) were given a diagnosis of presence anxious disorder (ICD-10). It was found, that 30 patients (68 %) have had a psycho-social stress before the beginning of diabetes mellitus. All patients having anxious disorder have been taking 20 mg dosed paroxetin.

Defined dependence was explored between the level of alarm and the duration of disease. Patients having anxious disorder have had the duration of diabetes mellitus more than 10 years and their level of reactive alarm was $54,21 \pm 2,06$. Patient having no signs of clinically expressed