KM-1404-005
THE DISEASE AS A PHENOMENON OF HUMAN NATURE: TOWARD UNDERSTANDING AND DEVELOPING OF V.KH.VASILENKO’S PHILOSOPHICAL LEGACY. PART 2
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Empirical data on the nature of disease were systematized and summarized in Part 1. In Part 2 the same problem is addressed by the deductive method from the general biological and philosophical standpoint. Methodological assessment of the most popular definitions of the disease is undertaken along with expanded medico-philosophical interpretation of the notion of disease as an anthropological phenomenon including its applied aspects.
Key words: life; death; disease; pathogenesis; the nature of disease; adaptations; evolution; stabilizing selection.

KM-1404-013
PECULIARITIES OF CLINICAL PICTURE OF DUODENAL ULCER IN THE POPULATION OF EUROPEAN NORTH
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Duodenal ulcer remains a serious challenge to gastroenterology due to the difficulty of its management despite recent progress in this field. The role of melatonin in human body has attracted much attention of researchers in the recent years. Disturbances of its production are widely recognized to be involved in pathogenesis of duodenal ulcer and its exacerbation. This review summarizes results of research on the clinical picture of the disease in the population of European North where circadian and seasonal variations in melatonin production are most strongly pronounced.
Key words: duodenal ulcer; melatonin; north.

KM-1404-020
LEPTIN AND ADIPONECTIN IN PATHOGENESIS OF METABOLIC SYNDROME
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Metabolic syndrome, hypernutrition syndrome is a phylogenetically determined sequence of symptoms having common pathogenesis. Etiologically, it is due to excessive intake of adequate food. Enterocytes and omental adipose cells form an early phylogenetically unified and paracrinically regulated community that alternately realize exo- and endotrophic biological reactions. Visceral obesity, high level of non-esterified fatty acids (FA), formation of plasma FA pool and their integration into the endothelial membrane, and enlargement of enterocytes are the main cause of increased hydrodynamic pressure. Toll-like receptors perceive albumin associates containing a supraphysiological number of FA as aliens and initiate the inflammatory reaction. Lipid-overloaded cells undergo «endoplasmic stress», abnormal protein synthesis (folding), and apoptosis-like death. Visceral fat serves as phylogenetically early FA depot for the realization of biological functions of homeostasis, trophology, endoecology, and adaptation; it is anatomically confined and regulated at the level of paracrine communities. The subcutaneous depot realizes the phylogenetically late locomotor function; its size is not anatomically restricted. Visceral adipose cells have no receptors for phylogenetically late insulin (INS). Cells of the subcutaneous FA depot are specialized adipocytes having INS and GLUT4 receptors. They are regulated by the phylogenetically late humoral mechanisms at the total body level. Leptin initiates in vivo humoral, hypothalamic regulation of the size of INS-insensitive visceral adipose cells quantitatively programmed in ontogenesis; also, it prevents «endoplasmic stress» and apoptosis, regulates food consumption. Leptin initiates switching FA storage from the visceral adipocyte pool to the subcutaneous one. Adiponectin is a phylogenetically late humoral inducer of regulation of the optimal in vivo number of cells from the hypothalamic level. It is biologically predetermined to regulate the number (proliferation) of INS-dependent adipocytes in subcutaneous fat.
Key words: metabolic syndrome; non-esterified fatty acids; adipocytes; leptin; adiponectin.

KM-1404-030
POSTOPERATIVE COMPLICATIONS AFTER ORTHOTOPIC HEART TRANSPLANTATION
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We analysed postoperative complications in 106 patients after orthotopic heart transplantation based on the results of prospective observations during 2 year follow-up. Survival was estimated at 83% (88 patients). Deaths were caused by pyoseptic complications, pulmonary thromboembolism, acute pancreatitis, cardiac arrhythmia or transplant rejection due to non-compliance with the immunotherapeutic regime. The most frequent causes of deaths were pneumonia (28.3%), transplant rejection (11.3%), steroid-induced diabetes (14.6%). It is concluded that heart transplantation should be followed by thorough observation of the patients based at a specialized multi-field clinic to ensure continuous treatment and reduce lethality. Risk factors of unfavourable prognosis of heart transplantation are identified.

Key words: heart transplantation; postoperative period; complications.

KM-1404-035
PECULIARITIES OF THE STRATEGY FOR THE TREATMENT OF ELDERLY PATIENTS WITH DUODENAL ULCER AND CONCOMITANT METABOLIC SYNDROME
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The study showed that ulcer disease in patients with metabolic syndrome is characterized by painless clinical course, bowel disorders in the form of constipation, enhanced appetite, unmotivated requirement for hypoglycemic therapy, predisposition to complications along with activation of the inflammatory process in duodenal mucosa, high H.pylori count. The data obtained were used to develop the age-specific strategy for the treatment of elderly patients with duodenal ulcer and concomitant metabolic syndrome.

Key words: ulcer disease; metabolic syndrome; advanced age.

KM-1404-041
ENDOGENOUS FACTORS IN THE ASSESSMENT OF THE EFFECTIVENESS OF FERROTHERAPY OF IRON-DEFICIENCY ANEMIA
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We estimated the role of some endogenous factors influencing the effectiveness of ferrotherapy of iron-deficiency anemia. It was shown to yield good results in case of an initially low hemoglobin level, in the first half of menstrual cycle, in patients with normal Quetelet index or those with AB(IV) and B(III) blood groups at the age below 30 years.

Key words: iron-deficiency anemia; endogenous factors in effectiveness of ferrotherapy.

KM-1404-045
STATE-OF-THE ART AND PROSPECTS OF HIGH-TECH MEDICAL AID TO PATIENTS WITH CARDIAC ARRHYTHMIA BASED AT MILITARY MEDICAL FACILITIES
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Analysis of provision of high-tech medical aid to patients with cardiac arrhythmia based at military medical facilities showed that the available means and workforce are sufficient for the purpose. In order to facilitate access to high-tech medical aid it is necessary to equip arrhythmologic departments with up-to-date-instruments and set up cabinets of electrocardiostimulation in regional (naval) hospitals for implantation of temporary and permanent pacemakers. A program is pending for education (primary specialization) and advanced training of specialists in clinical cardiac electrophysiology, interventional and surgical arrhythmology.

Key words: high-tech medical aid; heart rhythm and conduction disorders; sudden cardiac death; heart failure; radio-frequency ablation; electrocardiostimulator; implantable cardioverter-defibrillator; cardioresynchronizing device.

KM-1404-051
NEUROSYPHILIS IN CLINICAL PRACTICE
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Presented is the description of the 41-year-old patient who was delivered to the emergency department of the clinical hospital. The patient has clinical manifestations of the stroke. Intracerebral hematoma of the right
Cerebral hemisphere was diagnosed on clinical examination. Serosurrey was positive for syphilis. Due to the suspected neurosyphilis, the central laboratory performed additional examination.

Key words: neurosyphilis; blood and spinal fluid serosurrey.

**KM-1404-054**
SUCCESSFUL CORRECTION OF CONGENITAL HEART DEFECTS: MULTIPLE DEFECTS AND ATRIAL SEPTAL ANEURYSM
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A case of congenital cardiac disorder with multiple defects in the secondary interventricular septum and atrial septum aneurysm in a young serviceman is reported. Plastic surgery of the atrial septum with a good clinical outcome included closure of the defect with a flap harvested from the autopericardium under conditions of artificial blood circulation and warm blood cardioplegia.

Key words: congenital cardiac disorder; atrial septum defect; atrial septum aneurysm.

**KM-1404-057**
MEDICAL ERRORS AND CONFLICTS IN CLINICAL PRACTICE
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The number of medical errors is increasing. Medical errors have negative impact on the professional activities of physicians. Analysis of the causes and incidence of medical errors and conflicts in clinical practice of foreign and domestic doctors is presented based on the author’s observations and didactic materials recommended for training doctors to prevent conflict situations in their professional work and for developing a common strategy for the prevention of medical errors.

Key words: medical errors; conflicts in medical practice; prevention of medical errors and conflicts in clinical practice; pediatrician.

**KM-1404-064**
DEBATABLE ASPECTS OF DIAGNOSTICS AND DIFFERENTIAL DIAGNOSTICS OF IRRITATED BOWEL SYNDROME
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Diagnostics and differential diagnostics of irritated bowel syndrome are currently governed by Rome III criteria that require that the patients’ complaints be correlated with these criteria and a minimal amount of laboratory and instrumental studies be conducted. However, such approach is fraught with errors bearing in mind the subjective character of complaints. It is therefore more reasonable to regard diagnosis of irritated bowel syndrome as exclusion diagnosis.

Key words: irritated bowel syndrome, diagnosis, differential diagnosis.