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GASTROESOPHAGEAL REFLUX DISEASE IN MEDICAL UNIVERSITY STUDENTS

Introduction

Gastro-esophageal reflux disease (GERD) is common in the community and in daily clinical practice. The prevalence of GERD in the general population in western countries is around 10–20 % and the condition accounts for up to 4 % of consultations with family physicians. There is evidence that primary care physicians face challenges in making an accurate diagnosis of GERD and in managing it effectively. Routine visits to family physicians are becoming shorter and the demands on physicians to ensure compliance with screening and performance targets reduce the time available for interactions with patients regarding their symptoms. Attention is increasingly being placed on innovative methods that can aid the primary care physician in rapidly reaching a diagnosis and in supporting management. In this article we used a GerdQ questionnaire to diagnosis the GERD among the students. The GerdQ questionnaire (or GERDQ , or GERD-Q , or Gerd-Q ia a Gastroesophageal reflux disease questionnaire) is a questionnaire designed for therapists and other primary care professionals, helping at the initial stage in establishing a diagnosis “ gastroesophageal reflux disease (GERD), deciding on the possibility of prescribing therapy or the need to use instrumental research methods (EGDS, pH-metry , pH- impedancemetry), determine the impact of the disease on the quality of life of patients and evaluate the effectiveness of the therapy. The GerdQ questionnaire contains 6 questions divided into three groups:

group A – questions about the presence of symptoms that testify in favor of the diagnosis of GERD: heartburn and regurgitation;

group B – questions about symptoms, the frequent appearance of which puts the diagnosis of GERD in doubt: nausea and epigastric pain;

group C – questions about the impact of the disease on the quality of life, testifying in favor of the diagnosis of GERD: sleep disturbance and taking additional medications in connection with the existing symptoms of GERD

The patients are asked about their state of health and related sensations over the past week.

The diagnosis of GERD is established with a total score of ≥ 8 .

The assessment of the probability of erosive lesion of the esophageal mucosa in the surveyed patient is carried out as follows: with a total score of 8 to 10, erosion will be detected in 48.5 % of cases, from 11 to 18 points – in 60.7 %.

Goal

This study was conducted to identify the frequency of GERD in students from foreign countries.

Materials and methods of research

The study was conducted using a GerdQ questionnaire designed to analyze the symptoms of GERD. Statistical processing of the results was carried out using the Excel program.

Results of research and their discussion

66 students were participated in the study of which, 55 were females and 11 were males. GERD was diagnosed in 12 people (18.2 %), mostly females. Of which 1 student have the 60.7 %

risk of erosive lesion of the esophageal mucosa. And 21 (31.8 %) students have symptoms of acid associated diseases. And 27 (40.9 %) of students have biliary tract disorders.

Conclusion

1. About 18 % of respondents have GERD and need in EGDS and treatment.
2. 32 % of respondents have acid associated diseases and need in EGDS and treatment.
3. 41 % of respondents have biliary tract disorders and need in ultrasound of bile tract and treatment. All these students must visit the doctor and in need of treatments.

LITERATURE

1. Результаты многоцентрового наблюдательного исследования по применению международного опросника GerdQ для диагностики ГЭРБ / В. О. Кайбышева [и др.] // РЖГГК. – 2013. – № 5. – С. 15–23.
2. Della Casa D, Missale G, Cestari R. GerdQ: tool for the diagnosis and management of gastroesophageal reflux disease in primary care. *Recenti Prog Med.* 2010 Mar; 101 (3):115–7.
3. Dent J, Vakil N, Jones R, et al. Accuracy of the diagnosis of GORD by questionnaire, physicians and a trial of proton pump inhibitor treatment: the Diamond Study // *Gut.* – 2010. – Jun; 59 (6). – P. 714–721.

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COMPARISON OF ISCHEMIC HEART DISEASE RISK FACTORS BETWEEN BELARUS AND SRI LANKA

Introduction

Ischemic heart diseases (IHD) also known as coronary heart diseases results from unhealthy lifestyles together with contribution from genetic inheritance [1]. IHD is the major contributor to cardiac associated mortality worldwide [2]. IHD deaths in Sri Lanka reaches 22.66 % of total deaths according to the latest WHO data published in 2020. Sri Lanka ranks 106 in the world ranking of death rate from coronary heart diseases [3]. In 2020, cardiovascular diseases ranked no.1 among all causes of deaths in Belarus, killing 18,417 people (nearly 60 %) out of 31,039 [4]. There are numerous risk factors leading to IHD such as age, sex, family history, chronic diseases (diabetes, hypertension, hyperlipidemia), smoking, abusive use of alcohol, obesity and psychological factors [5].

Goal

In this article we have a comparison of risk factors in a selected number of patients who are suffering from IHD in Belarus and Sri Lanka. The article aims to point out that the IHD risk factors we are focusing on are different between the two countries due to various factors such as geographical, cultural, behavioral and socioeconomical backgrounds.

Materials, Methodology

Data on patients of Belarus were collected from randomly selected 30 different patients; both male and female, aged between 55–85 years, at the cardiological department of Gomel city clinical hospital no. 3 in March, 2023. Data on patients of Sri Lanka were collected from randomly selected 30 different patients; both male and female, aged between 55–85 years, from National Hospital of Sri Lanka (NHSL) annual data report of cardiovascular diseases; December, 2022. The risks we assessed among the selected patients were; age, gender, family history, smoking, alcohol, diet, hypertension, diabetes, cholesterol, chronic kidney diseases, physical activities, sleep, living condition, psychological wellbeing and BMI. Laboratory risk