

- lower socioeconomic status, and
- limited healthcare access are intertwined with increased rates of infection.

### **Conclusions**

In conclusion, the complex interplay between *H. pylori* infection, gastric cancer risk, and socioeconomic factors in India underscores the need for a multifaceted approach to addressing these public health challenges. By understanding the specific nuances of *H. pylori* infection within the Indian context and considering the socioeconomic determinants that influence disease dynamics, targeted interventions can be developed to mitigate the burden of gastric cancer and improve treatment outcomes. Moreover, the regional prevalence of *H. pylori* is subject to change due to influences like dietary habits, cleanliness practices, and socioeconomic factors.

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## **EFFECTIVENESS OF DIAGNOSTIC EXAMINATION OF COPD**

### **Introduction**

Chronic obstructive pulmonary disease (COPD) is a chronic inflammatory disease lung which may lead to airflow obstruction in lung. It is one of the major cause of morbidity and mortality worldwide among 70–80% of adult with undiagnosed COPD [1].

The two main common conditions that contribute to COPD are chronic bronchitis and emphysema. Smoking is one of the leading cause. The main challenge in early detection of COPD are, failure to identify early signs and symptoms and the lack of spirometry. [1] Patient with undiagnosed COPD are at risk of poor outcome and worsened life quality. That’s why early detection of COPD is necessary to decrease the impact of COPD [1].

Diagnosis of COPD is confirmed when in the presence of risk factor exposure and respiratory symptoms, after inhaling bronchodilators[2]. Even though COPD is a progressive disease, it is treatable. With proper management patient can achieve effective symptom control and a quality of life.

### **Goal**

This study aims to study the effectiveness of diagnostic examination of COPD.

### **Material and methods of research**

Retrospective analysis of the case histories of patients who visited Gomel City Polyclinic No2 was done. This descriptive-analytical study was conducted on 25 patients who are being treated for COPD in the said polyclinic.

The gathered data was from January to December of 2019.

## The result of the research and their discussion

Table 1 – Medical examination of COPD

	Medical examination	No. of patients	%
Mandatory Diagnosis	Blood test	25	100%
	Chest X ray	23	94%
	ABG test	21	84%
	ECG	24	96%
	Sputum analysis	20	80%
Specific test	Spirometry	16	64%
Additional diagnosis	CT lung	7	28%
	Bronchoscopy	4	16%

25 patients were examined in this study in which 15 of the patients were female and 10 of the patients were male. The average age of the patients is between 70-87 years.

In this study group 25 patients out of 25 (100%) had done general blood test, 23 patients (94%) had done chest X ray, 21 (84%) patients had done ABG (arterial blood gas) test, 24 (96%) had done ECG, 20 (80%) had done sputum analysis which are the mandatory diagnostic method. 16 (64%) patients had done spirometry, which are the specific diagnostic methods. 7 (28%) patients had done CT lung and 4 (16%) patients had done bronchoscopy which are additional diagnostic methods.

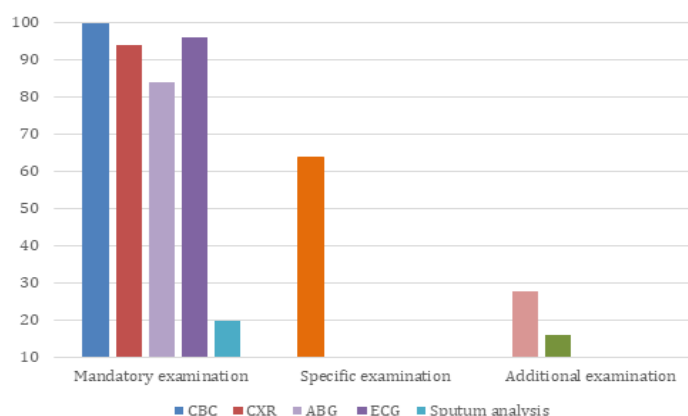


Figure 1 – Medical examination based on study

### Conclusions

COPD is one of the leading causes of death worldwide. Previously the case of COPD was more in men, but nowadays it's common among women population also. Even though it has no cure, early detection can help in managing symptoms effectively and prevention of complications.

Based on the analysis of data received from the clinic about diagnostic examination of COPD effectiveness of diagnosis of COPD is moderate. Among the 25 people most patients had done mandatory examination, but specific examination is only done by 64% of people and additional examination was done by only 22% of people.

In order to increase the effectiveness of medical examination, it is necessary to properly educate patients about the importance of examination in preventing complication and managing symptoms. We also have to reduce misdiagnosis.

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