

risk factors through lifestyle changes and appropriate medical interventions, individuals can reduce their risk of developing arterial hypertension and improve overall cardiovascular health. Additionally, understanding the impact of non-modifiable risk factors can help healthcare providers personalize treatment plans and interventions for better outcomes in hypertension management.

LITERATURE

1. *Barker, D. J.* The origins of the developmental origins theory / DJ. Barker // *J Intern Med.* – 2007. – May 261(5). – P. 412-7. – doi: 10.1111/j.1365-2796.2007.01809.x. PMID: 17444880.
2. World health rankings website; <https://www.worldlifeexpectancy.com/sri-lanka-coronary-heart-disease>.
3. BelTa article from 10 April 2020; “Cardiovascular disease named leading cause of death in Belarus in January-March”; <https://eng.belta.by/society/view/cardiovascular-disease-named-leading-cause-of-death-in-belarus-in-january-march-129689-2020/>
4. Kumar, P. and Clark, M., 2009. *Kumar & Clark’s clinical medicine*. Edinburgh: Saunders Elsevier.
5. *Maas, A.* Gender differences in coronary heart disease / A. Maas, Y. Appelman // *Neth Heart J.* – 2010. – № 18. – P. 598–603. – <https://doi.org/10.1007/s12471-010-0841-y>.
6. Puddey IB, Rakic V, Dimmitt SB, Beilin LJ. Influence of pattern of drinking on cardiovascular disease and cardiovascular risk factors--a review. *Addiction.* 1999 May;94(5):649-63. doi: 10.1046/j.1360-0443.1999.9456493.x. PMID: 10563030.

УДК 616.12-008.331.1-07

Omana lekshmi Priya

Scientific Supervisor: T. A. Kurman

Educational Establishment

“Gomel State Medical University”

Gomel, Republic of Belarus

THE EFFECTIVENESS OF MEDICAL EXAMINATIONS OF PATIENTS WITH ARTERIAL HYPERTENSION

Introduction

Hypertension is a common and potentially life-threatening chronic condition associated with increased risk of cardiovascular diseases, such as myocardial infarction and cerebral stroke. [1] At the same time, due to its asymptomatic nature, the afflicted population is largely unaware of being hypertensive [3].

Periodic health screening is a routine that most people living in developed economies have grown accustomed to. Regular medical examinations are often recommended to patients with arterial hypertension in order to monitor their blood pressure levels, assess cardiovascular risk factors and to improve treatment strategies [1].

However, the effectiveness of medical examinations in patients with arterial hypertension remains a crucial area of scientific inquiry, necessitating comprehensive research to assess their diagnostic value, prognostic implications and overall health impact of patients [1]. Due to general lack of resources, routine medical examinations are very rare in developing countries [2, 3].

For the case of hypertension, it is generally cheap to both screen and diagnose it and also treat it or at least control it using available medication [2]. Under diagnosis has been linked to a variety of possible causes like socio-economic indicators such as education, community characteristics and infrastructure, and even individual risk at time preferences [2, 3].

By shedding light on this topic, we strive to contribute to the optimisation of diagnostic practices and therapeutic interventions of patients with arterial hypertension, ultimately enhancing the quality of care provided in clinical settings.

Goal

The aim of this study is to find out the effectiveness of medical examinations of patients with arterial hypertension based on outpatient cards.

Material and methods of research

Retrospective analysis of the case histories of patients who visited Gomel City Polyclinic No.2 was done. This descriptive-analytical study was conducted on 20 patients of age 55 years and above who are being treated for arterial hypertension in the said polyclinic. The analysed data was from January to December of 2022 to 2023.

The results of the research and their discussion

Table 1 – Medical examinations of arterial hypertension

	Medical examination	No. of Patients	%
Mandatory diagnostics	Measurement of blood pressure	20	100
	General blood test	5	25
	Biochemical blood test	4	20
Additional diagnostics	ECG	7	35

20 patients were examined in this study in which 7 (35%) of the patients were male and 13(65%) of the patients were female.

The diagnostics methods named under mandatory medical examination such as the measurement of blood pressure was done by 20 (100%) of the patients, general blood test was done by 5 (25%) of the patients and biochemical blood analysis was done by 4 (20%) of the patients.

In the examined group of people an average of 48.3% have done the mandatory examinations.

In the observational group 7 (35%) out of the 20 patients under gone the additional medical examination such as electrocardiogram.

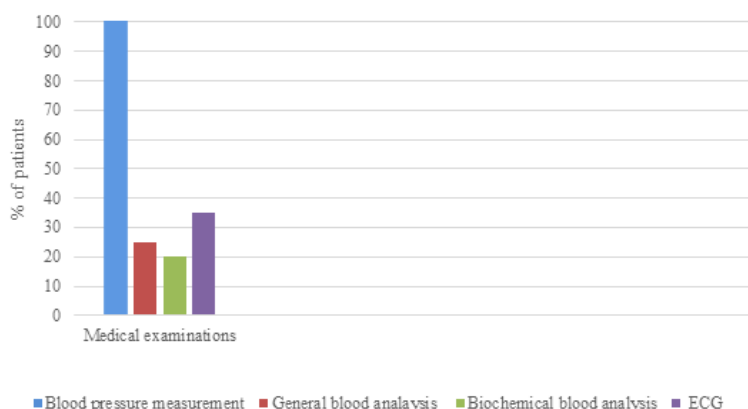


Figure 1 – Medical examinations based on the study

Conclusions

An analysis based on the case histories of patients with arterial hypertension who visited the polyclinic No 2 in the Gomel region was done. A total of 20 patients were analysed.

Among the observed group of patients who aged 55 and more, there were 13 female patients and 7 male patients. According to the research data the effectiveness of medical examinations of patients with arterial hypertension is moderate.

Among the 20 people only an average of 48.3% passed the mandatory medical examinations such as measurement of blood pressure, general blood analysis and biochemical blood analysis. And out of 20 patients only 35% of them passed the additional medical examinations such as ECG.

In order to improve the effectiveness of medical examinations it is necessary to devote more time to educational work with the population, to remind the patients about the need to undergo examinations in order to reduce the risk of complications such as myocardial infarction and cerebral stroke.

We find these results as expected, since hypertension medication is relatively cheap, while life style changes are often not costly and hard to adopt. An interesting avenue for future research might be to consider the role of mental health and social interactions in managing hypertension [3].

LITERATURE

1. Boerma, W.G.W., Rusovich, V.S., Schellevis, F.G., Schreurs, H.W [Electronic resource]. – Access mode – <https://www.nivel.nl/nl/publicatie/case-finding-and-monitoring-hypertension-belarus-primary-care-improving-effectiveness> – Access date: 04.03.2024.
2. National Library of Medicine [Electronic resource]. – Access mode: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC9226761/> – Access date: 02.03.2024.
3. [Screening, diagnosis, and long-term health outcomes in developing countries the case of hypertension Electronic resource]. – Access mode: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6281241/> – Access date: 02.03.2024.

УДК 613.2:616.36-004

P. G. B. Rathnaweera, D. R. Jayaweera

Scientific supervisor: Assistant prof. C. G. Malaeva

Educational Establishment

“Gomel State Medical University”

Gomel, Republic of Belarus

THE IMPACT OF NUTRITION ON CHRONIC LIVER CIRRHOTIC PATIENTS

Introduction

Patients with liver cirrhosis often experience the significant challenge of malnutrition, which affects approximately 20–50% of individuals [1]. The severity of malnutrition tends to progress parallel to the advancement of liver failure. While malnutrition may be less apparent in patients with compensated cirrhosis, it becomes readily identifiable in those with decompensated cirrhosis. Studies have reported rates of malnutrition in around 20% of patients with compensated cirrhosis and over 50% of individuals with decompensated liver disease [2]. As outlined in these clinical practice guidelines (CPGs), the presence of malnutrition and muscle mass loss is strongly associated with an increased incidence of complications. These complications include a higher susceptibility to infections, hepatic encephalopathy (HE), ascites, and are also independent predictors of reduced survival rates in individuals with cirrhosis and those undergoing liver transplantation. Based on these findings, it is crucial to acknowledge malnutrition as a complication of cirrhosis, further exacerbating the prognosis for patients diagnosed with this condition [1]. The possibility of reversing malnutrition in cirrhotic patients remains a topic of debate. While there is consensus on the importance of enhancing the dietary intake of these patients and avoiding unnecessary restrictions that lack evidence-based support, achieving improvements in nutritional status and muscle mass is not always feasible [3, 4].

Goal

The aim of this research is to examine the significance of nutrition in the management of liver cirrhosis, as the role of nutrition has often been a secondary consideration when addressing this condition. Consequently, this article will prioritize nutrition as a fundamental aspect in the treatment of liver cirrhosis, with the goal of improving patient prognosis. Furthermore, the objective is to investigate the correlation between nutrition and liver cirrhosis by delving into