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C. J. Boushey . (1995) 27 5 /

1,32 [16]. 5 [15].

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Me S- (SAM) SAH , SAM S- SAH- (SAH). [13, 21]. (MC), 5- ; ( ). [21, 22]. [22]. [13, 22]. [13, 23]. [24, 25, 26], [27, 28, 29]. [13, 30]. 1964 . 1969 [13, 31]. Physicians Health Study 1992 . 5% 3 [17, 32]. 20 – 40% [13, 33]. [34, 35]. [36].

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– V ( ) X XII [15, 17, 37].

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12 [39, 46, 47,

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[50, 51].

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131 4,5 12 [52].

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12 [33, 52, 55, 56], B6 B12 [21, 27, 57, 58, 59, 60] B6 B12 [54].

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## SUMMARY

### INFLUENCE OF ANTISECRETORY TREATMENT TO THE HOMOCYSTEINE LEVEL AND LIPOPROTEIN PROFILE AT ISHEMIC HEART DISEASE ASSOCIATED WITH ACID PEPTIC DISEASE (Review)

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*Present article includes the review of the modern literature data about influence of antisecretory treatment to the homocysteine level at ischemic heart disease in a combination with acid peptic disease. Analysis of modern references shows, that antisecretory treatment increases the homocysteine level and plays the important role in development and formation of coronary risk ratio.*

**Key words:** *dyslipidemia, atherosclerosis, homocysteine, acid peptic disease, proton pump inhibitors.*

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