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АКТУАЛЬНІ ПИТАННЯ ТЕОРЕТИЧНОЇ ТА ПРАКТИЧНОЇ МЕДИЦИНИ

Topical Issues of Clinical and Theoretical
Medicine

Збірник тез доповідей
III Міжнародної науково-практичної конференції
Студентів та молодих вчених
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Сумський державний університет
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Conclusion: Osteotomy is best method for controlling and not let to improve the pain syndrome and more deformities in patient with gonarthrosis or knee arthritis.

RELATIONSHIP BETWEEN ABNORMAL PLACENTATION AND PREVIOUS CAESAREAN SECTION

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Abnormal implantation of placenta *previa* is life-threatening condition. The increased incidence of placenta praevia in the last decade may be the result of increasing caesarean delivery rates during this period or the more widespread use of ultrasonography for detecting placenta praevia.

Aim: The purpose of this study was to assess relationship between previous Caesarean section and subsequent development of placenta praevia

Methods: This analytical study was conducted in the Sumy City Maternity Hospital №1 during 2010-2014 years. 252 pregnant women were included in this study, - 38 (15,1%) with history of previous Caesarean sections. These patients were divided into two groups. Group A with previous one Caesarean section, group B with previous, two Caesarean sections. The diagnosis is usually established by ultrasonography and occasionally supplemented by magnetic resonance imaging (MRI).

Results: Out of 252 cases placenta praevia was diagnosed in 14 cases (5,6%). All patients with abnormal implantation of placenta *previa* were analyzed prospectively. 11 (5,1%) from pregnant women without history of previous Caesarean sections were found to have placenta praevia. Group A included 28 patients and 2 (7,1%) were found to have placenta praevia. In Group B 10 patients were studied and placenta praevia was diagnosed in 1 (10%) of them.

Conclusion: It was confirmed that previous caesareans increase the risk of placenta praevia and the risk is proportional to the number of previous Caesarean sections.

CAUSES OF ACUTE UPPER GASTROINTESTINAL BLEEDING IN NIGERIA

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Upper gastrointestinal bleeding (UGIB) is one of the commonest gastrointestinal emergencies.

The aetiology of UGIB differs throughout the world, reflecting geographical differences in common disease states. In South and Central Africa, and in most of the developing world, a bleeding peptic ulcer is the commonest cause of bleeding from the upper intestinal tract, but there are parts of East Africa and India where bleeding varices as the result of portal hypertension are more common. They may be the result of cirrhosis of the liver, schistosomiasis causing noncirrhotic periportal fibrosis, or extrahepatic portal vein obstruction. Other causes of bleeding include stress ulcers, hiatus hernia, uraemia, gastric carcinoma, a tear in the lower oesophagus following a forceful vomit (the Mallory-JWeiss syndrome), and multiple shallow erosions following aspirin or some other drugs.

Aim This study was carried out to determine the aetiology and management outcome of patients with UGIB presenting at our facility located in Southwest Nigeria and compare them to the few studies done in the Northern part of the country and other parts of the world.

Materials and methods: 67 patients who presented with UGIB and underwent upper gastrointestinal endoscopy at the Ekiti State University Teaching Hospital (EKSUTH), Ado-Ekiti, Southwest Nigeria, were retrospectively studied, relevant data extracted and analysed.

Results: The demographic data of the patients showed a mean age of 41.84± 12.81 years, (ages ranged from 17 to 75 years), 40 (59.7%) were males, while 27 (40.3%) were females giving a male to female ratio of 1.5:1. Clinical presentations included haematemesis and melena in 26 (38.8%), followed by haematemesis in 22 (32.8%) and melena in 19 (28.4%) of the patients. Antral mucosal erosions were the commonest cause of UGIB (49%) in this study, this finding was contrary to the earlier reports from the studies in the Northern part of Nigeria, Egypt and Tanzania where variceal