

**МІНІСТЕРСТВО ОСВІТИ І НАУКИ УКРАЇНИ  
СУМСЬКИЙ ДЕРЖАВНИЙ УНІВЕРСИТЕТ  
ФАКУЛЬТЕТ ІНОЗЕМНОЇ ФІЛОЛОГІЇ  
ТА СОЦІАЛЬНИХ КОМУНІКАЦІЙ**



**СОЦІАЛЬНО-ГУМАНІТАРНІ  
АСПЕКТИ РОЗВИТКУ СУЧАСНОГО  
СУСПІЛЬСТВА**

**МАТЕРІАЛИ V ВСЕУКРАЇНСЬКОЇ НАУКОВОЇ КОНФЕРЕНЦІЇ СТУДЕНТІВ,  
АСПРАНТІВ, ВИКЛАДАЧІВ ТА СПІВРОБІТНИКІВ**

**(Суми, 20-21 квітня 2017 року)**

**Суми  
2017**

tracts in the last decade. To main etiological triggers belong: smoking, hazardous environmental impacts, papilloma-virus infection. A progressive tendency increasing towards laryngeal cancer incidence is observed that motivates to look for new methods of therapy and post-surgery rehabilitation, especially considering the large number of post-surgery complications.

**Scope:** To investigate the modern aspects and approaches in therapy and post-surgery rehabilitation in patients with laryngeal cancer.

**Materials and Methods:** A number of publications were analyzed, which concluded that I and II cancer stages respond to conservative treatment (radiation therapy and chemotherapy), being efficient in most cases, but III and IV stages require surgical treatment. Namely laryngectomy, i.e. larynx complete dissection, remains the golden standard of surgical treatment. In post-surgery period there observed a large number of various complications, among them glottic incompetence, respiratory distortion, deglutitive problems, osphresis and gustus disorders. In our opinion, the most serious problems remain respiratory distortion and glottic incompetence rehabilitation, often leading to difficult social adaptation of such patients.

**Conclusions:** Considering the increase of laryngeal cancer and laryngeal malignant neoplasms incidence increase, large number of post-surgery complications, difficulty of social adaptation, this problem remains the extremely challenging and requires steady monitoring and implementing of new methods in surgical treatment and development of new programs for post-surgery rehabilitation. Special attention deserves normalizing glottic incompetence and act of normal respiration, which will enable the patient to come back to full life.

## **IMPROVING QUALITY CARE FOR PATIENTS WITH COMMUNITY ACQUIRED PNEUMONIA**

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Nowadays pneumonia remains an important medical and social problem. Due to its significant prevalence, high rates of morbidity and mortality; significant economic costs is a result of the disease.

Development and implementation of proposals to improve the provision of medical care to patients with pneumonia would allow at earlier stages to prevent the extension motion, the occurrence of complications and to apply adequate program of treatment.

**The purpose of the work.** Improving health care quality in adult patients with community acquired pneumonia in Sumy.

**Materials and methods.** The retrospective analysis of 164 case histories in patients with community acquired pneumonia during the period 2014 - 2015 and the poll inpatients - 44 questionnaires.

**Research results.** The research case histories in hospitalized patients showed that dominated group of patients was 60 years and older - 48 people (29%). In gender relation prevailed men - 94 patients (57.3%).

Most patients promptly applied for medical assistance - 108 people (66%), but late treatment observed in 34% of cases (56 patients).

126 patients (77%) were found to appeal for medical assistance to the district physician, with most patients were hospitalized on the same day - 84 patients (51.2%). It remains fairly high rate of late hospitalization - 12 patients (7.3%).

The average number of bed - days in the department was 13.11, but 14 days and more were 74 patients (45.12%) treated. However, only 10.8% of patients applied 1-5 days of onset.

The increase of treatment duration up to 14.2 days was found in 32 patients with a diagnosis of segmental, poly segmental pneumonia. Among patients diagnosed with bilateral pneumonia (10 people), the average bed-day increases to 14.75.

Conducted survey of patients showed that the age structure of the majority of respondents were aged 30 - 39 years - 16 people (36%) and in relation to gender it was more women (30 patients - 68.2%). Among respondents 50% have income levels to 2000 USD. At the same time 77% of patients argue that they spent 1500 USD or more on treating. This indicates the significant economic costs of treatment and a lack health facilities providing medicines and medical facilities.

**Conclusions.** A timely appeal of patient for medical care and timely hospitalization is one of the main factors that affect the disease course and duration of treatment. Research has demonstrated at the present stage healthcare reform in Ukraine it is necessary to develop management and control of Medicare quality at health care facilities based on the principles of modern management and implementation of internal audit mechanism as the main tool of continuous improve the quality of care.