viewed retrospectively. Eleven patients had been diagnosed with APS. Criteria for the diagnosis of antiphospholipid syndrome included at least one clinical manifestation of the disease (recurrent spontaneous abortion, thrombocytopenia, venous or arterial thrombosis) and at least one positive laboratory test (lupus anticoagulant and medium or high-positive anticardiolipin IgG). Anticardiolipin antibody titers were determined by enzyme-linked immunosorbent assay. Lupus anticoagulant activity was determined using the kaolin clotting time, activated partial thromboplastin time. The combination of LMWH and low dose aspirin was used for treatment during pregnancy.

Results: The average age of the patients with APS was 29,8 years (range 23–40) and the average gravidity was 2,5 pregnancies (range one to 4). Six patients had previous labor and delivery in anamnesis. Two patients had twins: diamniotic, monochorionic and diamniotic, dichorionic. 84% percent of the infants were delivered at 36 weeks gestation or later. Seven women were delivered by caesarian section (64%). Placental abruption was diagnosed in one case of preterm labor at 33 weeks of gestation. Cesarean section was done in another case of preterm labor because of preeclampsia. Preterm rupture of membranes was diagnosed in three cases (27%). Preeclampsia and placental insufficiency were each diagnosed in 36% of the pregnancies. The average body weight of the infants was 2930g (from 2100g to 3900g). There were no cases of IGR and only one case of fetal distress. Apgar score rates were marked as 8/9 (55%) and 8/8 (45%).

Conclusion. Pregnancy complications appear to be minimized with the use of low dose aspirin and LMWH. All eleven patients with APS delivered healthy infants – eight girls and five boys. There were no cases of IGR and only one case of fetal distress.

Literature:

1. Miyakis, S., Lokshin, M.D., Atsumi, T., Branch, D.W., Brey, R.L., Cervera R., Derksen, R.H.W.M., De Groot, P.G., Koike, T., Meroni, P.L., Reber, G., Shoenfelds, Y., Tincani, A., Vlahoyiannopoulos, P.G., Krilis, S.A. International consensus statement on an update of the classification criteria for definite antiphospholipid syndrome (APS) // Journal of Thrombosis and Haemostasis, 2005, 4, P. 295–306.

RIGIDITY / FLEXIBILITY OF COGNITIVE CONTROL IN FOREIGN STUDENTS

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An important factor in education is singularity of knowledge that should be used for designing the material of lectures and training manuals for students. One index of cognitive ability is the rigidity / flexibility of cognitive control, which may be different for people of different nationalities.

The aim of research is to determine the index of rigidity / flexibility of cognitive control in students of different nationalities.

Material and methods. The study included 29 students of 2nd-3rd years of the Faculty of Foreign Students of Grodno State Medical University. Depending on ethnicity, they were divided into 2 groups: group 1 (n = 19) – students from India,

group 2 (n = 10) – students from Africa. We determined the heart rate and the Stroop test of word-color interference. The time was defined for the three stages of the test and two indices were calculated. T3-T2 index was calculated as the difference in the execution time of the third (color words) and the second (color) cards. The greater difference shows the effect of interference and correspondingly more pronounced rigidity cognitive control. The ratio T2/T1 ratio determines verbal cognition. High values of this index indicate a predominance of verbal information processing method, low – perceptual method. The results were processed statistically using methods of nonparametric statistics.

The Results. The frequency of the pulse did not differ in the two groups of students. It was found that students from India expend significantly more time to complete the second phase of the Stroop test compared to students from Africa (4.76 (3.85, 5.55) and 3.74 (3.25, 4.0) s, p <0,05). There was also a significant difference in the index of rigidity between groups (-2.51 (-3.05, -1.74) and -1.0 (-1.28, -0.7), respectively, p <0,05), which indicates a greater rigidity of cognitive control in students from India and possible difficulties in the transition from a verbal cognition to perceptive. Also, students from India had higher index of verbal cognition in comparison with students from Africa (2.21 (1.93, 2.28) and 1,87 (1,79, 1,99), p <0,05), which confirms the rule.

Conclusions. Indian students had severe rigidity of cognitive control and greater verbal cognition in comparison with students from Africa, which requires different approaches in presentations of the lecture materials and methodical literature.

BURNOUT SYNDROME AMONG HEALTH CARE WORKERS WITH HIGHER MEDICAL EDUCATION

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Introduction. An increasing number of authors point to the need to pay attention to the development of burnout, which is a diverse phenomenon that is expressed in the mental and physical reactions to stressful situations in the workplace. Burnout is characterized by a state of emotional and mental exhaustion, physical fatigue, arising as a result of chronic stress on the job.

Aims is investigation of possible symptoms and severity of the burnout in health care workers with higher medical education.

Materials and methods. Anonymous questionnaire was conducted among practicing physicians of various specialties of several hospitals of Grodno and physicians of Grodno ambulance station. Total number of health care workers with higher medical education is 224. Questionnaire "Professional burnout" is based on the three-factor model developed by C. Maslach and S. Jackson and adapted by N. Vodopiyanova, E. Starchenkova. The method is designed to diagnose burnout subfactors such as "emotional exhaustion", "depersonalization" and "professional success." Test standards for the integral indicator of burnout: extremely high level