melanomas of uncertain primary origin.

Aim of the study. This case study hopes to bring more awareness and understanding about malignant melanoma of unknown origin, treatment methods, prognosis and the follow-up investigations and their findings within a span of 4 years.

Materials and methods. A 54-year-old male with no past medical history presented with a tumor-like development in the right axillary region. A skin lesion was removed, revealing a 3.5 cm diameter skin area and a cancer metastasis with a 4.5 cm diameter. The final clinical diagnosis was C77.3 Malignant neoplasms of lymph nodes of the axilla and upper limb. PET scan showed no metabolically active tumor processes, and molecular genetic investigations revealed a negative mutation in the BRAF gene.

Results and discussion. Melanoma of unknown origin (MUP) is the term used when the primary location is typically unidentified. MUP occurs in about 3% of all melanoma patients. About 60% of MUP diagnoses occur in LNs, while about 30% occur in subcutaneous sites. With the lowest percentage (10%) found in visceral organs. In a 2017 study titled "Treatment Outcomes for Metastatic Melanoma of Unknown Primary in the New Era", immunotherapy showed a somewhat higher median overall survival than target treatment; nevertheless, the findings are still unclear because of insufficient data. Following the excisional biopsy, the final diagnosis was made as C77.3: Secondary and unspecified malignant neoplasm of axilla and upper limb lymph nodes.

Conclusion. Most typically, melanoma of unknown origin is identified on suspicion after every other possibility has been ruled out. The sooner patients are diagnosed, the better their prognosis is.

STUDY OF THE EFFECT OF RIFAMPICIN-RESISTANT TUBERCULOSIS IN COMBINATION WITH ALCOHOL DEPENDENCE ON THE LEVEL OF INTERFERON-GAMMA IN THE BLOOD SERUM

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Introduction. The development of tuberculosis in patients with alcohol dependence leads to significant changes in cellular immunity and is characterized by a decrease in the production of gamma interferon (IFN- γ) by T-lymphocytes and impairment of IFN- γ -dependent macrophage activation.

Aim of the study. To study the effect of rifampicin-resistant tuberculosis (RR-TB) and alcohol dependence on the level of gamma interferon in blood serum.

Materials and methods. The study involved 41 patients with RR-TB,

divided into two groups: the main group (MG) consisting of 20 patients with RR-TB and alcohol dependence; and the comparison group (CG) comprising 21 patients with RR-TB without significant risk factors. The control group included 33 healthy individuals. Patients in both MG and CG did not differ significantly in age, gender, or characteristics of tuberculosis inflammation. All patients with RR-TB were examined according to clinical protocols. The level of IFN- γ in serum was determined using an enzyme-linked immunosorbent assay (ELISA). Statistical data processing was performed using STATISTICA software (Version 10.0).

Results and discussion. A comparative assessment of the baseline serum IFN- γ levels was revealed to be significantly lower in patients with RR-TB by 24.7% and 26.4%, respectively, in the MG and CG compared to those in the control group (p 1,2 =0.02) (Table 1).

Baseline levels of IFN- γ in the serum of patients with disseminated forms of MDR-TB

Name of the	Control	Patient groups		D
indicator	group, n=33	MG, n=20	CG, n=21	P
Serum IFN- γ	194,1	146,1	142,9	$P_{1,2} = 0.02$
level, pg/ml	(77,7-596,4)	(182,0-246,7)	(146,4-212,1)	$P_3 = 0,4$

Note: Comparison of groups: p1, p2 – control group and groups of patients with tuberculosis (main group and comparison group, respectively); p3 – comparison of groups of patients with pulmonary tuberculosis; Mann-Whitney U-test.

The baseline level of IFN- γ in patients from MG and CG did not significantly differ, being 146.1 (182.0-246.7) and 142.9 (146.4-212.1) respectively (p=0.4).

Conclusion. A low baseline level of endogenous IFN- γ was established in patients with RR-TB. The obtained results indicated that the presence of alcohol dependence in this category of patients did not significantly affect the level of IFN- γ .

COMPARISON OF SERUM LIPID LEVELS BETWEEN ISCHEMIC AND HAEMORRHAGIC STROKE PATIENTS: AN OBSERVATIONAL STUDY

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Introduction. Stroke, or cerebrovascular accident (CVA), leads to rapid brain function loss due to disrupted blood supply from ischemia or hemorrhage.