One of them is infertility. So to save reproductive health is very important to normalize menstrual cycle, to treat endometriosis and to prevent infertility.

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EFFICACY OF THE COMBINATION OF ATEZOLIZUMAB, BEVACIZUMAB, PACLITAXEL AND CARBOPLATIN IN LUNG ADENOCARCINOMA: A CLINICAL CASE

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Relevance. Lung cancer, particularly non-small cell lung cancer, remains one of the leading causes of cancer-related morbidity and mortality worldwide [1]. The advent of immunotherapeutic agents has revolutionized treatment paradigms; however, their optimal integration with existing chemotherapy regimens is still under exploration. This case highlights the potential synergy of combining immune checkpoint inhibitors with traditional chemotherapeutics, demonstrating significant tumor response and offering insights into personalized treatment strategies for advanced lung adenocarcinoma.

Target. To assess the effectiveness of a novel chemotherapy regimen combining atezolizumab, bevacizumab, paclitaxel, and carboplatin in a patient diagnosed with metastatic non-squamous non-small cell lung cancer (NSCLC).

Research methods. The patient, a 55-year-old male, initially sought treatment for joint pain and was ultimately diagnosed with metastatic NSCLC following imaging and diagnostic procedures. After confirming the diagnosis of stage IVa NSCLC, the treatment regimen included atezolizumab, bevacizumab, paclitaxel, and carboplatin as first-line therapy [2]. The patient's response to treatment was evaluated through periodic computed tomography scans and iRECIST criteria.

Results and their discussion. Prior to treatment, imaging results indicated tumor masses increasing up to 104 mm in size. After six months of the combined regimen, a substantial reduction in total tumors to 71 mm (68% reduction) was documented. Further examination after three more months showed continued regression to 62 mm (60% reduction).[2] The evaluation according to iRECIST criteria yielded a partial response with a -40% score, indicating clinical benefit from therapy. Combination

therapy involving atezolizumab has demonstrated promise in enhancing response rates among patients with advanced NSCLC. Previous research highlights that immune checkpoint inhibitors can synergistically improve outcomes when paired with traditional chemotherapeutics [2]. Our case highlights the benefit of combining immunotherapy, specifically the PD-L1 inhibitor atezolizumab, with standard treatment to manage complex cancer stages effectively. The results reflect a positive trend in tumor size reduction and patient recovery, supporting further investigation into this therapeutic combination.

Conclusions. The treatment regimen appears to provide a promising avenue for improving clinical outcomes in advanced lung cancer. Further research is warranted to corroborate these findings and optimize treatment protocols.

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A CLINICAL CASE OF A YOUNG PATIENT WITH POST-MYOCARDITIS ATRIAL FIBRILLATION AND HEART FAILURE WITH REDUCED EJECTION FRACTION

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Relevance. Myocarditis is defined as inflammation of heart myocardium due to numerous causes [1]. Initial clinical presentation may manifest chest pain, shortness of breath, fatigue and history of a recent upper respiratory infection [2]. Clinical course can be unpredictable as some of the patients might not need any sort of treatment and on the other hand some patients might even require heart transplantation due to severe heart failure [3].

Target. To discuss a case study of a young patient with post-myocarditis complications.

Research methods. Case report. 26 year old male. Previous ECG: Sinus rhythm (1 year ago). Presented with poor exercise tolerance, shortness of breath, fatigue following a severe cold. Fever: 39°C for 4 days, dry cough, runny nose. Smoking: 10 years. HR: 97 bpm (irregular) BP: 105/80. Heart dilatation, muffled sounds,