

Target. To examine the effect of application of amniotic membrane on the scar of the uterus during the operation cesarean section.

Research methods. Studying history cases of the patients with cesarean section and application of amniotic membrane on the scar of the uterus during the operation cesarean section, analysis results, ultrasound examination, statistic methods.

Results and their discussion. We have examined 25 cases of application of amniotic membrane on the scar of the uterus during the operation cesarean section. The indications to the operation cesarean section were the scar on the uterus after previous cesarean section. The average age of the patients was 31 ± 4 years. We have analyzed the sickness of the lower segment of uterus where is the scar in 7 days and 3 month after the operation. The results were that the sickness of the lower segment of uterus where is the scar in 7 days after the operation cesarean section with application of amniotic membrane on the scar was more on 3.5 mm that at the patients with classic operation cesarean section without using of amniotic membranes. At 3 months after operation this result was also on 2mm more that at the patients with classic operation cesarean section without using of amniotic membranes.

Conclusions. Using amniotic membranes helps in regeneration of the scar on uterus after the operation. The amniotic membrane is a promising and ethically non-controversial source of multipotent stem cells (hAESC). A preliminary study of 25 cases applying the membrane to a cesarean scar showed positive results, with follow-up examinations of the uterine segment at 7 days and 3 months post-operation.

LITERATURE

1. Ramon, C. Injectable amniotic membrane / umbilical cord particulate for knee osteoarthritis: a prospective, single-center pilot study / C. Ramon, S. Tighe // Pain Medicine. – 2019. – Vol. 20, № 11. – P. 2283–2291.

PREVALENCE OF DEPRESSIVE AND ANXIETY SYMPTOMS AMONG MEDICAL STUDENTS: A CROSS-SECTIONAL STUDY USING BDI-II, HDRS-17 AND HAM-A

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Relevance. Depression and anxiety are highly prevalent among medical students worldwide [1]. Academic overload, sleep deprivation, competitive learning environments and clinical exposure contribute to psychological vulnerability. Early identification using validated psychometric instruments is essential to prevent academic decline, burnout and long-term psychiatric morbidity.

Target. To assess the prevalence and severity of depressive and anxiety symptoms among medical students using standardized rating scales.

Research methods. A cross-sectional anonymous survey was conducted among 37 medical students. Data were collected via structured online questionnaires. Depressive symptoms were assessed using the Beck Depression Inventory-II (BDI-II). Severity of depressive manifestations was additionally evaluated using the Hamilton Depression Rating Scale (HDRS-17). Anxiety symptoms were measured using the Hamilton Anxiety Rating Scale (HAM-A). Scores were calculated according to established interpretation criteria, and descriptive statistical analysis was performed.

Results and their discussion. According to BDI-II, minimal depressive symptoms were observed in 54,1% of students, mild in 21,6%, moderate in 13,5% and severe in 10,8%. Clinically significant depressive symptoms (BDI-II ≥ 20) were identified in 24,3% of participants. Suicidal ideation was reported by 18,9% of respondents.

HDRS-17 findings showed normal scores in 48,6% of students, mild depression in 24,3%, moderate in 16,2%, and severe or very severe manifestations in 10,9%. Moderate to very severe depressive symptomatology was present in 27,1% of the sample.

HAM-A results demonstrated mild anxiety in 73,0% of participants, moderate anxiety in 18,9% and severe anxiety in 8,1%. Moderate to severe anxiety was therefore observed in 27,0% of students.

The findings indicate a considerable burden of psychological distress within the studied cohort. The coexistence of depressive and anxiety symptoms suggests the necessity of routine mental health screening and accessible institutional support systems.

Conclusions. Nearly one quarter of medical students demonstrated clinically significant depressive symptoms, and more than one quarter exhibited moderate to severe anxiety. Implementation of structured psychological screening and confidential counseling services within medical faculties is strongly recommended.

LITERATURE

1. Prevalence and predictors of anxiety and depression among medical students / N. Ibrahim, D. Al-Kharboush, L. El-Khatib [et al.] // International Journal of Environmental Research and Public Health. – 2019. – Vol. 16, № 15. – P. 2735.