



ASSESSMENT OF THE RISK OF PULMONARY THROMBOLIA ON THE WELLES SCALE

AUTHOR: ISHUTINA A.G.

SCIENTIFIC ADVISERS: CANDIDATE OF MEDICAL SCIENCES, SEYTMAGANBETOVA N.A., MASTER OF MEDICAL SCIENCES ALIEV O.M. NJSC "WEST KAZAKHSTAN MEDICAL UNIVERSITY NAMED AFTER MARAT OSPANOV", THE CITY OF AKTOBE, THE REPUBLIC OF KAZAKHSTAN.

Purpose of work. To assess the risk of developing pulmonary embolism according to the Wells scale www.msmanuals.com. in patients undergoing surgical treatment for joint diseases.

Materials and research methods. Study design - prospective. The study involved 108 patients undergoing emergency and planned surgical treatment for joint diseases, planned endoprosthetics, who were undergoing treatment in the traumatology department of the clinic of the GKP "BSMP" on the RV Aktope. The average age of the patients was 54 ± 16.0 years. The likelihood of developing PE was determined using the Wells scale www.msmanuals.com. Indicator <2 was assessed as low probability, from 2 to 6 as moderate probability, more than 6 - high probability. Statistical processing (descriptive statistics, Chi-square, Kruskal-Wallis, Mann-Whitney U test).

Research results. The study revealed a statistically significant low risk in 60 cases (62%), as well as a moderate risk of PE according to Wells criteria in 43 cases (72%) ($p = 0.268$). There were very few patients with a high probability, 5 (83.3%), while there were no significant differences between these groups of patients. Comparative analysis by gender, depending on the identified risk, revealed statistically significant differences among male patients with a low probability 52 (54%) and female patients 44 (45.8%) $p = 0.0082696$, as well as among persons with a moderate risk of male gender 29 (49%) and 30 (50%) female $p = 0.0082698$, respectively. In the history, among patients with a moderate probability of the risk of developing PE, IHD was often found - 21 (35.5%) $p = 0.004$, in patients with a low probability in 22 cases (22%) $p = 0.00345$. Among patients with low risk, AH of the 1st degree 49 (51%) and AH of the Shst 37 (38%) $p = 0.0031911$ were common. In patients with a moderate risk of developing PE, AH 1st stage was detected in 26 cases (44%), AH Shst - in 23 (38%) $p = 0.0032830$, respectively. In addition, among patients with moderate risk, patients with chronic bronchitis 16 (27%) $p = .0098$ were identified. They also showed a statistically significant increase in the level of fibrinogen 7.2 ± 21.0 ($p = 0.002$).

Conclusions. Analysis of the risk of developing PE on the Wells scale www.msmanuals.com revealed the presence of risk in all patients undergoing surgical treatment for joint diseases. Low and moderate increase in risk was statistically significant and was determined in the presence of coronary artery disease, arterial hypertension and chronic bronchitis in patients.