

ROLE OF DISTURBANCES OF THE INTESTINAL MICROBIOCECENOSIS IN PATHOGENESIS OF THE HEPATOBILIARIS ZONE DISEASES

I. Skrypnyk. *Therapy, Ukrainian Medical Stomatological Academy, Poltava, Ukraine*

INTRODUCTION: The intestinal microbiocenosis should be considered as an ecosystem. In case of insufficient growth of succharolytical flora (SF) cholesterol is absorbed into blood and causes not only hyperlipidemia, the cholesterol level in the gallbladder bile (GB) is increased, it resulting in reduction of the cholato-cholesterol coefficient (ChChC).

AIMS & METHODS: The aim is to show the effectiveness of prebiotic Lactulose and probiotic - *Lactobacillus acidophilus* & *Lactobacillus rhamnosus* due to the influence upon pH and intestinal microbiocenosis at treating the liver cirrhosis (LC) pts with porto-systemic encephalopathy (PSEP) of stages I-II and chronic cholecystitis (ChCh) in physico-chemical stage of cholesterol calculosis.

81 LC pts and 27 ChCh pts were examined. In all pts intestinal dysbiosis (ID) of stages I-II (the increase of the proteolytic flora, especially *E. coli*, *Clostridium*, and the decrease of the SF /*L.bifidus*, *L.acidophilus*/ growth) take place. All the pts were administered Lactulose and probiotic, it resulting in ID removing. The prescription of Lactulose to the LC pts (1—1.5 g/kg of weight) against the background of the basic therapy, gave a quick removing of the PSEP and liver tests' normalization.

RESULTS: The basic therapy of LC resulted in non-considerable dynamics. Only using the curing complex including Lactulose, the aminoacids' correlation coefficient $\text{val+lei+isolei/ thyr+phen}$ increased to 1.65 ± 0.12 versus 0.9 ± 0.11 before the treatment (normal index 2.5 ± 0.15) together with the hyperammoniemia decrease. After treatment the activity of alanyl-aminotransferase, gamma-glutamyl transpeptidase and alkaline phosphatase was increased in 2.7; 3.9 and 3.1 times accordingly, the argynase activity was decrease in 2.8 time ($p < 0.01$).

The treatment of ChCh pts using Lactulose + Ursodeoxycholic acid resulted in the complete disappearance of the GB lithogenic properties, their evident decrease

against the background of the monotreatment with Ursodeoxycholic acid. ChChC in GB after the treatment was 10.3 ± 1.2 (before the treatment 5.6 ± 0.6), it being 10.1 ± 1.0 normal ($p < 0.05$).

CONCLUSION: As a model to the regulation of the microbiocenotic association and decrease of the bowel pH, the usage of pre & probiotics are very effective, it preventing metabolic disturbances taking place at the pathogenesis of the liver and gallbladder diseases. *Gut* 2009; 58 (Suppl II) A202