

TREATMENT OF CHRONIC OBSTRUCTIVE PULMONARY DISEASE WITH CONCOMITANT SPINE PATHOLOGY

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Summary

The dynamics of spirometry indices and exhaled air temperature has been presented in patients with chronic obstructive pulmonary disease (COPD) with concomitant spine disorders, receiving standardized treatment and vertebral therapies. The patients were randomized in two groups: main — 73 persons, in the age from 18 to 75 ($49,3 \pm 3,7$) years, 35 males and 38 females, and control group — 64 persons, 32 males and 32 females, in age from 24 to 76 ($49,7 \pm 4,2$) years. The sub-groups for comparison were isolated from the both above named groups: one sub-group consisted of COPD patients with acute cervical and thoracic pain symptom, other sub-group — of those with muscular dystrophy, respiratory muscles spasms and disturbances of motions in costal-vertebral joints i.e. with chronic abnormalities. Vertebrological methods of treatment improved functional state of bronchial tree in COPD patients with concomitant spine disorders. This was confirmed by an improvement of such indexes as $MEF_{75}\%$ ($p < 0,01$), $MEF_{50}\%$ ($p < 0,001$), $MEF_{25}\%$ ($p < 0,01$) and SaO_2 . Complex therapy in patients with COPD and spine disorders, which manifested with muscular atrophy, discomfort and limitation of thorax excursions, also improved the general condition and daily living activity of patients, but in a less extent.