

PECULIARITIES OF HEMOSTASIS IN PATIENTS WITH CHRONIC OBSTRUCTIVE PULMONARY DISEASE IN DIFFERENT PHASES OF PATHOLOGICAL PROCESS

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Abstract

It is known that in more than a third of patients with chronic obstructive pulmonary disease (COPD) there are revealed the disturbances of hemorheological status. A few studies were made to detect the disturbances in both hemostasis links alone or in combination in different phases of the pathological process.

The *aim* was to assess platelet-vascular and plasma links of hemostasis in patients with COPD in different phases of pathological process.

Material and methods. 36 COPD patients in different phases of the pathological process were enrolled. 13 patients (main group) were examined in mild infectious exacerbation phase and 1 month after its resolution. 23 patients of control group were examined once — not earlier than 6 months after last infectious exacerbation. Clinical parameters, blood serum C-reactive protein (CRP) and hemostasis indices (platelet adhesion index (PAI), activated partial thromboplastin time (aPTT), prothrombin index (PI), prothrombin ratio (PR) and international normalized ratio (INR)) were evaluated.

Results. In COPD patients the disturbances of hemostasis manifested mainly by hypercoagulation in both platelet-vascular and plasma links of hemostasis. An abnormal PAI typical for acute exacerbation of COPD was still present one month after the resolution. At the same time the deteriorations in plasma link of hemostasis occur mainly on the level of external pathway of blood coagulation and do not depend on the phase of the pathological process.

Key words: chronic obstructive pulmonary disease, hemostasis, infectious exacerbation, stable phase.

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