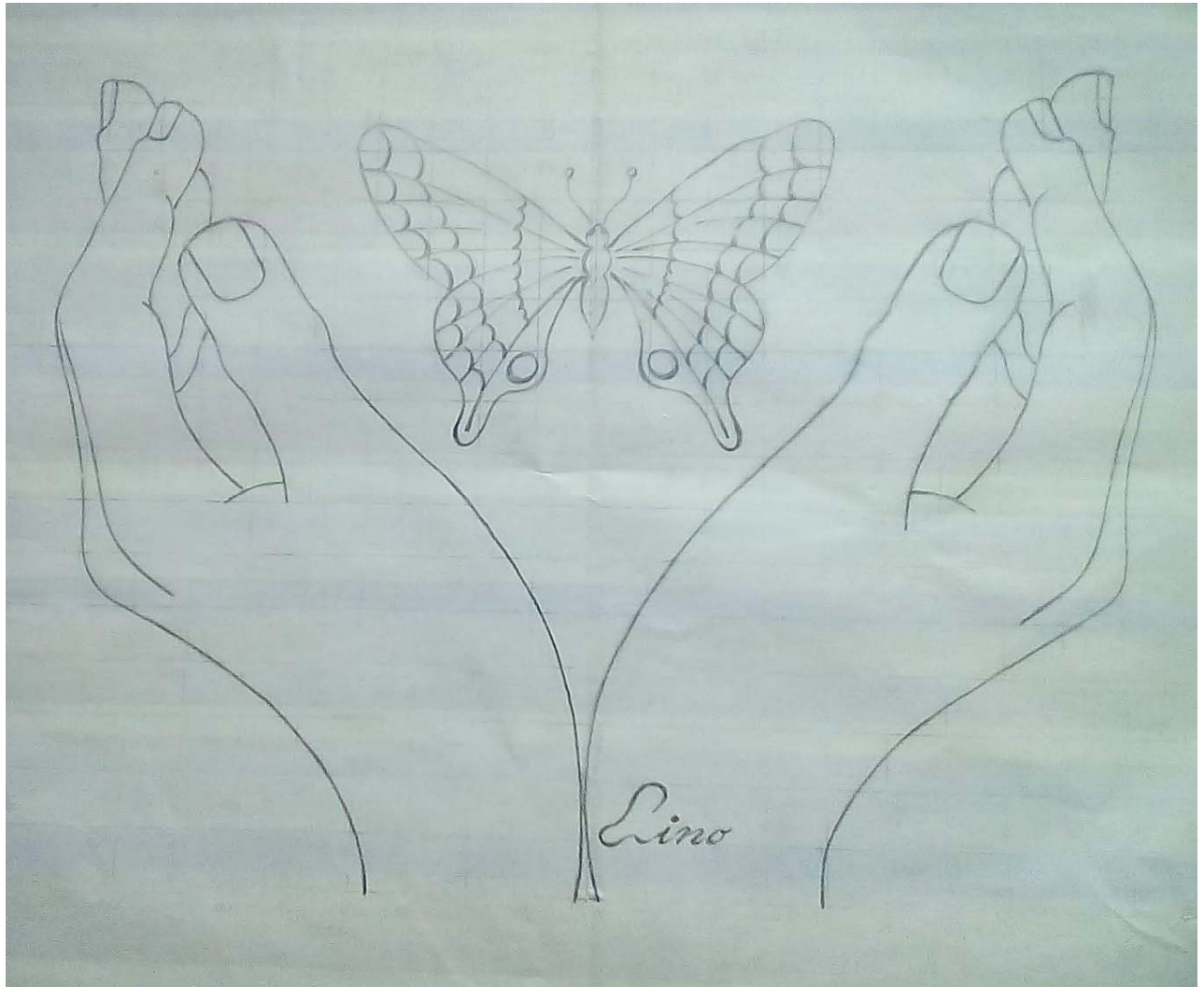


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NEUROVEGETATIVE EVALUATION IN PATIENTS WITH URINARY TRACT INFECTION TREATED WITH FLOGOFILM^(R): MEDICAL AND NURSING ASPECTS.

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KEYWORDS: IVU, medical aspect, nursing aspect.

KEY-WORDS: FLOGOFILM^(R), SISTEMA NEUROVEGETATIVO.

ABSTRACT

Aim: The purpose of our study is to evaluate the cardiovascular safety of Flogofilm^(R) for the treatment of urinary tract infections in geriatric patients. **Materials and Methods:** In our study, 14 subjects affected by urinary tract infections were enrolled. All enrolled subjects, over 50 years of age, voluntarily agreed to undergo screening for urinary tract infections during hospitalization. Using a non-invasive method based on the evaluation of neurovegetative tone by studying heart rate variability lasting about 250 beats, data relating to the variables LF, HF, LF/HF were extrapolated and analyzed both with the fast Fourier transform and by Regression Analysis. All participants signed the consent for the recording and processing of personal data. Following urinary bacterial load assessment, patients enrolled in the study underwent digital electrocardiographic assessment lasting about 250 beats with a 5-lead medixai electrocardiograph for post-treatment control with Flogofilm^(R) for 3 days. **Results:** data analysis revealed a non-statistically significant variation in the value of LF, HF, LF/HF after 3 administrations of Flogofilm^(R) for urinary tract infections. Both the data processed by fast Fourier transform and the data deriving from the regression analysis confirmed the absence of statistically significant variations in the parameters relating to the study by means of analysis in the frequency domain of the neurovegetative tone (LF, HF, LF/HF). **Discussion:** From the data in the table it emerges that therapy with Flogofilm^(R) does not determine a statistically significant variation in ortho and parasympathetic neurovegetative tone values indicative of cardiovascular safety in geriatric patients. **Conclusions:** The pilot study we

conducted allowed us to exclude the possibility of an increase in cardiovascular risk in patients undergoing treatment with Flogofilm®. In this pilot study we have noted the absence of statistically significant variations in the parameters relating to neurovegetative functionality. Currently the size of the sample under examination is not sufficient to make a reliable evaluation that can be extended to the entire population.

TABLE

	BASE ± DS	CONTROL ± DS	Probability (P)
FFT - LF	69,893 + 16,925	70,879 + 15,834	0,841
FFT - HF	32,750 + 18,459	28,964 + 15,832	0,472
FFT - Total	1619,429 + 3758,454	483,429 + 297,710	0,281
Fft - LF/HF	3,611 + 3,105	3,855 + 3,131	0,775
AR - LF	65,850 + 21,279	72,093 + 12,520	0,238
AR - HF	33,964 + 21,236	27,807 + 12,489	0,243
AR - Total	2233,857 + 1425,962	629,500 + 404,879	0,266
AR - LF/HF	3,705 + 3,218	3,494 + 2,313	0,813

Tab. 1 Descriptive analysis of data relating to the ANALYSIS in the frequency domain of neurovegetative tone before and after treatment with Flogofilm^(R). The probability is considered significant only if $P < 0.050$.

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Abstract created from the synthesis of the experimental section of the thesis. Authors: [Attinelli Sofia](#) e-mail: attinelli.1900193@studenti.uniroma1.it

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