There is no treatement for aquagenic urticaria. However, there are some treatment options available to reduce symptoms. Antihistamines are medications used to treat allergy-like symptoms. Your doctor may recommend you take a prescription antihistamine to calm your hives after coming into contact with water. If you have a severe case of aquagenic urticaria and can't breathe, you may need to use an epipen. Epipens contain epinephrine, also known as adrenaline. They are only used as an emergency alternative for severe allergic reactions. Epipens increase blood pressure to reduce swelling and hives. They help the lungs function when they're constricted.

Conclusion. People with aquagenic urticaria can drink water, but they shouldn't let it get on the skin. They should limit rituals cleaning to 5 minutes having shower once or twice a week. Moreover, ration is also important, people with such disease should become vegetarian to make their body produce less oil.

PROGERIA

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Introduction. Progeria is a rare syndrome in children characterized by physical symptoms suggestive of premature old age. It is a very common autosomal dominant genetic disorder, in which people have symptoms similar to those of aging, but at a very early age. Those who born with this disorder usually live in their mid-teens to early twenties. It is a genetic condition that occurs because of a transformation of genes and is rarely inherited, that those who suffer from it usually do not live for a period of time when they can have children. Although progeria is a term that applies in its exact meaning to all diseases that include symptoms of premature aging, it is often found in people with Hutchinson-Guitdford-progeria syndrome (HGIPS). Scientists are interested in progeria disease itself because it may reveal important information about the natural aging process. It develops during a cellular division in a new fertilized egg or in the parents gametes.

Progeria is a Greek word what is divided into two parts: pro, which means premature, and gerya, which means aging, causes premature aging, so those who suffer from it live at an average of fifteen years only. People develop with great acceleration, so that the average age of children increases from five to ten times, compared to normal. The first case of this disease was clearly described in 1886 by Jonathan Hutchinson and was also described separately in 1897 by Hastings Guipford. The disease was later called by their names and now it is called Hutchinson-Guilford progeria syndrome.

Aim. The aim of the study was to inquire into progeria disease analyzing different data.

Materials and methods. We have researched information about progeria to study more about causes and symptoms of it.

Results and discussion. It cannot be said that progeria is a hereditary disease because it is not transmitted from parent to patient, but rather is caused by a genetic defect. A genetic mutation occurs in fetus during the months of pregnancy. The gene responsible for this disease have been remained unknown for a long period of time, due to many difficulties, including small number of patients and distributed between long distances, which made it more difficult to conduct studies. However, scientists were able to find the reason in 2003. They studied the genetic system of twenty patients and their families. There were similarities among 18 patients carrying the same change, located in the LMNA (lamine A/C) gene on the first chromosome at position 22, and the cause of the defect was substitution of one nitrogenous base, which led to the change of the amino acid guanine to amino acid adenine. It caused the disease, because change in one gene is responsible for abnormal protein progerin, which cannot function properly, holding

the nucleus of the cell together. Inheritance of this disease is very rare because the person with a progeria does not live long enough to be able to have own offsprings.

In the first months of baby`s life it seems normal, until it reaches the eighth month. The symptoms of aging begin to progress rapidly, so the skin wrinkles make look of old skin, the patient`s hair falls out and person become bald at the age of four, child`s length does not increase more than one meter, internal organs are also getting older very fast. A child with a progeria does not exceed more than 16 kg, even if he reaches adolescence. Patients may complain on diseases affecting the elderly people, such as atherosclerosis, arthritis or osteoporosis, in addition to vascular heart diseases. Size of the head is very large with small lower jaw. Nevertheless, children can talk, think and learn. All symptoms are similar despite different nations and races.

Conclusion. Progeria is a fatal disease. As it is caused by a genetic mutation, it is incurable. However, there is a drug called farnesyltransferase inhibitor (FTI) which is in trials for potential treatment. We hope ongoing researches can help people with progeria in the near future.

EXPLORING DIFFERENT WAYS IN WHICH FIRST-YEAR STUDENTS MEMORIZE AND REPRODUCE TEXT AND GRAPHIC INFORMATION.

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Introduction. The learning activity of modern pupils and students is associated with a high mental load, and the need to process large amounts of information, identifying the most important elements of it. The ability to quickly sort, interpret and transfer information into long-term memory is critical to adapting to a rapidly changing world. Previously, numerous studies have found that there are mechanisms for modulating memory by concomitant emotions, stress, or the presentation of various irritations. In addition, a number of studies have shown that despite the fundamental nature of memory, men and women use different cognitive strategies in remembering information. However, most studies on memorization mechanisms and learning strategies for students are based on outdated models that do not take into account the ever-increasing information load and diversity of information entering the brain.

Aim: Given the above, the goal of our work was to investigate different strategies for memorizing schematic and textual information by modern students, as well as the relationship between memorization ability and time of day.

Materials and methods. The work was carried out by testing 59 1st year students (18-19 years old), who gave their consent to anonymous testing and using the data obtained for scientific research. All students were divided into 2 groups. One group was tested in the morning hours and the other in the afternoon. In order to identify the ability to remember the test subjects were seated one person per desk and within 60 seconds showed a slide with the task. After that the slide was hidden and the time for playing back the memorized information was given. The subjects were given three different tasks: 1 to twenty familiar terms written in black, without references, large enough to be seen from any place in the audience; 2 to twenty schematic images and three to twenty unfamiliar terms. The results obtained were processed using the Statistika 6.0 program.

Results and discussion. All students were found to have achieved the same results by presenting 20 familiar terms. Both morning groups and groups tested in the afternoon reproduced on the average 55±0.15% of correct answers. These results did not depend on the gender of the test subjects. Presentation of information presented in the form of schematic images revealed that morning groups (showed 55.02% of correct answers) coped with this test better by 11% ($p=0.013$) than groups that were tested in the afternoon (showed only 44.15% of correct answers). At the same time, the test subjects were given the