

with cruroraphy. In connection with the weakness of the ligamentous apparatus of the diaphragm, in 11 (13.2%) patients, alloplasty with a mesh explant was performed and fixed with interrupted sutures. In the case of a history of concomitant diseases, simultaneous interventions were performed. In the early postoperative period, complications were noted in 12 (14.5%) patients. Thus, transient persistent postoperative dysphagia was detected in 8 (9.6%) patients, which was arrested conservatively.

**Conclusions.** In connection with the development of scientific and technical progress and the introduction of modern technologies in surgical practice, the diagnosis of hiatal hernia, as well as the selection of patients for antireflux treatment with sliding hiatal hernia, should be carried out exclusively according to strict indications based on the data of a comprehensive laboratory-instrumental examination. At the same time, the volume and technique of surgical intervention should be based on objective data obtained both before the operation and studied intraoperatively. The introduction of minimally invasive laparoscopic technologies in the surgical treatment of HHHPD helps to reduce the time of postoperative rehabilitation of patients, to reduce the number of complications, as well as to improve the quality of life in the long-term period.

#### INTERACTIVE METHODS FOR STUDYING MEDICAL MICROBIOLOGY, VIROLOGY, IMMUNOLOGY

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**Introduction.** It has been proven that an attention is the first step in learning. The students' communication skills are an important tool that they can develop and improve. To keep students interested I prefer teaching methods that allow students to talk and share with each other. I've been using the Hot Seat Method as a teaching technique in my course Medical Important Bacteria since 2015.

Aim is to repeat and generalize knowledge about the classification and general characteristics of bacteria, pathogenesis and immunity of infections, microbiological diagnostics, principles of treatment and prevention of bacterial infections.

**Materials and methods.** This class doesn't require special equipment. The usual educational literature is used as instructions. Bacteria name cards are used as handouts. An important nuance: it's better to conduct this form of classes when students are well prepared. *Basic structure of class:* one student takes on the role of some kind of bacteria (such as staphylococcus, gonococcus, or chlamydia). I give him a card with the name of the bacterium on it. The

student himself doesn't see what is written on the card, but all the students in the group see it. Sitting in front of the rest of the group, the student asks his groupmates: «Am I a coccus?», «Am I gram positive?», «I've grown on simple nutrient media?», «Do I cause respiratory infections?», «Am I sexually transmitted?», «Is there a vaccine against me?», etc. Others students can answer these questions with «Yes» or «No». The student asks questions until he determines what kind of microbe it is. *Variations:* in order to give all students alternately the opportunity to be in the spotlight while increasing everyone's participation, students take turns taking on the role of different bacteria. *The lecturer at such a colloquium* observes the progress of the discussion, helps in difficult and controversial situations, assesses how students speak and use specific terms, correct mistakes and summarizes.

**Results.** It's a great teach-reiteration method that helps to identify in-the-moment misconceptions and provides students the opportunity to help each other in a very positive way. It has helped my students develop critical thinking skills and strengthen their communication skills. Students are more interested in helping their groupmates instead of waiting for me to say what is right. The fact that a lecturer can observe the strategy being used is so incredible because seeing students in action can identify and correct problematic points.

I like this strategy because it really engages students in their own learning. I use this strategy when I want my students to be more active. Instead of just bringing information to them, I help them discover it on their own. As with any teaching environment, you want to make sure you understand the needs of your audience. In the last lesson of the semester, I asked the students what they thought of this method. They unanimously stated that they really liked it, as they could give immediate face to face feedback to each others' responses. The most part of my students said they were happy when they changed their sitting and listening habits in classroom. Some students remarked that they saw approaches to problems that were very different from their way of approaching them. They found that they have learned a lot from being able to see the work of other students. They commented that the opportunity to work with more than one student on the same problem was beneficial.

**Conclusions.** This game attracts attention, requires active information processing and promotes better assimilation and long-term memorization of the material. This teaching method really helps my students memorize important material, forms a positive attitude towards the subject being studied, teaches them to share and collaborate. In the context of such a discussion, it's impossible to maintain the