МЕДИЦИНА XXІ СТОЛІТТЯ

Матеріали науково-практичної конференції молодих вчених з міжнародною участю


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clinical, bacteriological and serological examinations. Levels of IL 1β and TNF in patients’ blood serum were examined with the help of immunoenzyme analysis.

High levels of IL at the onset of the disease with their decrease in dynamics were established. Interrelation of indices of IL 1β and TNF in patients’ blood serum at the onset of the disease with severity, course of, pathologic process and period of sanation was revealed.

Thus, quantitative content of IL 1β and TNF at the onset of pathologic process may serve as prognostic criterion for II course in children and possible as argument for its correction.

VALUE OF ETIOLOGIC FACTOR IN FORMING OF CLINICAL PICTURE OF INFECTIOUS MONONUCLEOCIS FOR CHILDREN

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Infectious mononucleosis (IM) is one of the often registered clinical forms of herpesvirus. According to the opinions of various authors etiological factor of IM may be Epstein-Barr virus (EBV), cytomegalovirus (CMV), herpes virus type 6. The aim: to identify the clinical picture of IM depending on the etiology of the disease.

We analyzed 107 medical records of children 1 - 18 years, who were hospitalized in the Regional Children's Infectious Hospital of Kharkiv. Among them: 66 - patients IM EBV etiology, 41 - CMV. Diagnosis is based on clinical, laboratory, special immunological (determination of DNA viruses in the blood by PCR, and – founding of antibody classes IgM, IgG by ELISA test, and instrumental methods.

We have found, that clinical picture of the patients is characterized by intoxication, catarrhal syndromes, generalized lymphoadenopathy, tonsillitis, hepatosplenomegaly, presence of exanthema, enantema and specific changes in the peripheral blood (appearance of limphomonocytosis and atypical mononuclear cells).

However, EBV IM has been characterized by short-term of fever, hepatosplenomegaly, catarrhal syndrome, lacunar angina, rarely noted symptoms of hepatitis, exanthema, often enantema. In peripheral blood characterized by anemia, marked leukocytosis, thrombocytopenia, rarely, the presence of atypical mononuclear cells.

CMV IM has been characterized prolonged: hyperthermia, hepatosplenomegaly, hepatitis with cholestasis; often catarrhal tonsillitis, hemorrhagic exanthema, sometimes catarrhal symptoms. In peripheral blood registered leukopenia, thrombocytosis, the presence of – atypical mononuclear cells.

Thus the identified of clinical picture allows doctor to be guided in differential diagnosis and determining the right antiviral choice, the duration of their uses and to determine the strategy for monitoring of patients later.
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