**P. A. Alieva, S. E. Malikova, S.S. Filatova, T. A. Ivanova**

**IMPROVEMENT OF TREATMENT EFFICIENCY IN CHRONIC INFLAMMATORY DISEASES OF UTERINE ADNEXA**

**Research advisor: Tuchkina Irina, Doctor of Medical Science, Professor**

**Department of Obstetrics, Gynecology and Children Gynecology**

**Kharkiv National Medical University,**

**Kharkiv, Ukraine**

**Actuality:** Inflammatory diseases of the female reproductive system prevail among gynecologic abnormalities and their frequency comprises up to 70%. Chronic genital and extragenital conditions remain most challenging in diagnosis and differentiation, as their treatment is associated with specific pathogenic mechanisms of their development. The relevance of this problem is conditioned by a number of significant long-term consequences for women's health, such as secondary infertility, menstrual disorders (MDs), ectopic pregnancy and pelvic pain syndrome. Chronic inflammatory diseases of the pelvic organs (CIDPO) should actually be considered as polysystemic disorders involving complexes, associated with many adaptation processes in the female body.

**Materials and methods:** The study implied examination of reproductive age patients, diagnosed with CIDPO, who underwent in-patient treatment at gynecological department of Kharkiv Maternity Hospital No.1 in the years 2014-2015. Main clinical symptoms included pain (65.6%), dysmenorrhea (51.1%), dyspareunia (27.9%), MDs as hyperpolymenorrhea (34.4%) and oligoopsomenorrhea (14.4%). Bacteriologic findings in patients with CIDPO revealed different types of coccobacillary microflora, chlamydia, ureaplasma, with the predominance of microbial associations in most cases. Thiopoetin class of drugs (Glutoxim) was given priority in immunocorrective therapy.

**Conclusions:** Studies have shown that immunocorrective treatment results in a rapid and significant reduction of pain syndrome, normalization of regulatory function of sympathetic-adrenal system and MDs, improvement of hemodynamic parameters and elimination of endothelial dysfunction, which substantially improves the results of treatment and prevents relapses of the disease in future.