

in two position will be interpreted in conjunction with the physicians clinical acumen. It has a high diagnostic yield in detection of pleural effusion origin in phthisiatrician practice.

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ROLE OF THE CLINICAL AND LABORATORY DATA IN
DIAGNOSTICS OF EHRLICHIOSIS

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Aim. Investigation of the clinical picture and laboratory diagnostics of ehrlichiosis.

Methods. The researches were performed by the department of infectious diseases KNMU. The study included 68 patients. In 14 patients ehrlichiosis has been confirmed by microscopical, cultural methods and method of PCR-detection. From them: 9 - men, and 5 – women. The middle age of patients was 42,22 years.

Results. In 8 patients (57,1 %) a mixed infection of ehrlichiosis and Lyme disease was observed. Patients with ehrlichiosis complained of fever – in 85,7 % of cases, headache (78,6 %), myalgia (64,3 %), appetite loss (57,1 %), general weakness (64,3 %). Pain in the epigastric area of the stomach (35,7 %), nausea (42,8 %), vomiting (21,4 %), diarrhea (21,4 %), the phenomena of catarrhal pharyngitis (28,6 %) were more rare symptoms. More rarely, maculopapular rash – in 2 patients (14,3 %), lymphadenopathy – in 4 patients (28,6 %) were observed. 9 patients (64,2 %) with ehrlichiosis developed leukopenia, thrombocytopenia, – in 9 patients (64,2 %), anemia – in 8 (57,1 % of cases). In blood serum growth of the AsAT level – in 12 patients (85,7 % of cases), the AlAT – in 7 (50 %) are defined. Together with the Scientific Research Institute of I.I.Mechnikov we conducted a research of samples of blood of patients with ehrlichiosis. During light and fluorescent microscopy in granulocytes and blood monocytes intracytoplasmic morula-like formations are appeared, which are probably the diagnostic criterion of ehrlichiosis. In the experimental test line of promyelocytic suspension of human cells HI-60 the potential effectiveness of the method of accumulation of ehrlichiosis agents to identify the ability of this pathogen to induce morula formation is confirmed.

Conclusions. Positive results of the PCR-detection of Ehrlichia in samples of blood from infected people, homogenates of ticks, infected cells HI-60 confirm that the territory of east region of Ukraine is a circulation area of Ehrlichia, which are capable of causing corresponding infectious diseases of people.

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DRUG ADDICTION AS A RISK FACTOR OF BARTONELLOSIS

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Introduction. World practice testifies to the leading role of Injection Drug Users (IDU) in support of epidemic process of infectious diseases with the haemocontact mechanism of transmission (HIV-, HCV-, HBV-infections and others). Parasitic strategy of *Bartonella* consists in development of persistent infection.