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ADVANCEMENT IN PREVENTION OF DENGUE FEVER IN INDIA

Introduction. Dengue is a tropical disease caused by the dengue virus. Dengue has

become a global problem since the Second World War and is common in more than 110

countries, mainly in Asia and South America. Each year about 528 million people are

infected dengue virus and approximately 10,000 to 20,000 die from this disease.

Scientists were able to find the vaccine "DENGAVIX" (CYD-TDV, live attenuated) in

Mexico in 2015. However, studies of this vaccine have shown that its use is effective

and safe only for people who have already had Dengue. Nowadays experiments are still

being conducted to find vaccine to eradicate this dangerous disease.

Aim. To study the epidemic situation of Dengue in India and assess the feasibility of

further use of vaccination against this disease.

Materials and methods. An analysis of the scientific literature, official data of WHO on

Dengue cases was conducted.

Results. In India the first official epidemic of dengue was registered in 1963–1964. A

number of outbreaks have been increased in India since then. In Delhi, in 2015, 15,867

cases of Dengue were reported. It was the largest outbreak of Dengue fever since 2006.

Based on official data, 49 million cases of Dengue were recorded in India in 2013. In

2016, number of Dengue cases increased to 53 million. At the same time Global

Network for the Burden of Disease (2018) reports that the number of deaths from

Dengue in 2013 amounted to 31,612 cases, but in 2016 the number of deaths decreased

to 22527.

For assessment of Dengue burden and vaccine researching towards of this disease in

India regions with the high numbers of Dengue cases is necessary to have population

based incidence data. In this aim the Department of Health Research (DHR), the

Government of India and the Indian Council for Medical Research (ICMR) have

activated the project of creating a network of virological diagnostic laboratories in the

country since 2009.

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From 2014 to 2017, 200,000 suspected dengue patients were examined in 52 virology laboratories. As a result of laboratory studies in 28% of patients, the diagnosis of Dengue was confirmed. The greatest number of positive results were in patients older than 20 years. Patients who suffered from Dengue were taken into account, and their serotype was identified in order to apply the appropriate vaccine.

Conclusion. Dengue is considered fatal, as it leads to a decrease in immunity or death. India is one of the countries which has a substantial health and economic burden of Dengue. New approaches to the study of Dengue, patient identification, surveillance in countries with the highest frequency of Dengue fever, and advanced research on Dengue vaccines in the context of a rapidly developing disease will soon significantly reduce the incidence of Dengue fever and possibly eliminate this.

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ETHIOPATHOGENESIS OF ACNE

Acne, a disease of the hair follicles and sebaceous glands, appears in men and women approaching their sexual maturity.

The disease may present only with a few comedones or papules, or be an extensive process. In women, periodic exacerbations occur before menses.

P. acnes multiplies in sebum, changes in the follicular epithelium forming plugs termed comedones.

An excessive formation of sebum is a pathological factor in acne; P. acnes multiplies and modifies its components.

The sebaceous glands are localized on the whole body, except for the palms, soles, balanus, clitoris and labia. The largest and most numerous ones are on the face, chest and back.

The sebaceous glands in newborns are large, but regress soon after the birth. They remain relatively small during infancy and a larger part of childhood. They enlarge and become more active in the prepubertal period. Secretion of the sebaceous glands is

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