characterized by the proliferative changes of vessels, skin and/or internals and without adequate antibiotic therapy is fatal.

Aim: Study of azithromycinum efficiency administration at patient with bacillary angiomatosis.

Methods: anti-HIV-1/HIV-2 ELISA, IFA with Bartonella antigen, CD4 level, blood cytofluorometry, liver function tests, histological researches, ultrasound examination of abdominal cavity organs, computer tomography of pectoral and abdominal cavities organs.

Results. Bacillary angiomatosis of the skin and internals was diagnosed in instrumental-laboratory studies at a 35 year-old patient, with confirmed diagnosis of HIV-infection, IV clinical stage. The drug of choice for bacillary angiomatosis therapy is erythromycinum due to confirmed antiangiogenic effect, however it has adverse effects: 1) expressed side effects from gastrointestinal tract; 2) hepatotoxicity, that makes it impossible to use for therapy of the liver bacillary angiomatosis; 3) high course dosage and necessity of multiple reception; and 4) high resistance of Bartonella spp. (57% of strains) exactly to erythromycinum marked at our research work of antibiotics sensitivity. Therefore azithromycinum in the dose of 500 mg twice daily was administered for the treatment of the patient. Drug has a higher then erythromycinum antimicrobial activity; creates higher and stable concentrations in tissues; has the protracted period of half-life which diminishes frequency of administration; is acid-stable; has higher bioavailability, easier gets to the pathologically changed tissues; has a rare cases of advisable reactions and medical interactions. A patient's skin angiomatosis manifestations disappeared in two weeks therapy. Complete regress of bacillary angiomatosis abnormalities of internals were not found also at control instrumental researches after 6 months of antibacterial therapy on a background of highly active antiretroviral therapy. Thus azithromycinum is effective at bacillary angiomatosis and can be included to the schemes of its treatment and prophylaxis.

Conclusions: Treatment and prophylaxis with azithromycinum is recommended to all patients with bacillary angiomatosis in HIV-infected persons. A further study of antiangiogenic effect of azithromycinum is perspective to develop the optimal scheme of therapy.

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LABORATORY INDEXES OF PATIENTS WITH HEPATITIS B IN PROGNOSTICHNOMU ASPECT
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According to data of World Health Organization presently more than 2 milliard persons in the world infected by the virus of hepatitis B. Approximately 50 million of

a new patients only with a acute form registered in is the world annually, 600 thousands die from the disease.

The purpose of our work was a search of prognostic criteria of unfavourable course of patients with acute hepatitis B.

Materials and methods. 29 patients with acute hepatitis B were investigated. Patients were distributed on groups: to the first group patients which a favourable course of disease - convalescence was in were taken (consist form 24 persons); in the second group were 5 patients with acute hepatitis B, with an unfavourable course of disease (lethal cases). With the purpose of search of prognostic indexes of course of disease all biochemical indexes were analysed, (sublimate test, thymol test, ALT, general bilirubin level, bilirubin direct and indirect fractions, erythrocytes, haemoglobin, coloured index, leucocytes, eosinophil, bend and segment neutrophil, lymphocytes, monocytes, ESR, prothrombin index, fibrin, fibrinogen level), were investigated with the use of method of dendrograms (decision trees), which is one of the most modern methods of prognosis and decision of tasks of classification. Principle of work and basic features of algorithm of CART was used in this work.

Results and their discussions. Biochemical indexes were investigated at the day of admission of a patient. For of classification there were only two criteria are reflected - level of general bilirubin and leucocytes - as a numeral design showed, application of other criteria showed did not increase value of prognosis. Thus, it is discovered that level of general bilirubin 312 mkm/l and higher in the serum of blood in patients with acute hepatitis B and level of leucocytes in the general analysis of blood of $12,6 \times 10^9$ and higher reflects possibility of development of unfavourable course of disease. A discriminative analysis was farther conducted in relation to indexes that were found. It is possible to see, that all of patients were right prognostic interpreted to the patients with favourable and unfavourable course of disease. It is possible to see from the conducted canonical analysis, that both criteria approximately identically influence on exactness of prognosis (96,5%).

Conclusions. Content of general bilirubin 312 mkm/l and higher and level of leucocytes in the general blood analysis of $12,6 \times 10^9$ in the serum of blood of patients with acute hepatitis B is expedient to take into account at prognosis of unfavourable course of the disease.

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DETERMINATION OF CYTOKINE PROFILE IN THE SERUM OF HIV-INFECTED PATIENTS
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Purpose of work - study of cytokines in the serum of HIV-infected patients. Serum 72 HIV-infected patients was determined by the content of pro-inflammatory cytokines - tumor necrosis factor-α (TNF-α), interleukin-1β (IL-1β), IL-2, IL-6, IL-8 and anti-inflammatory IL-10 by ELISA.