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Адрес редакции: 140100, Узбекистан, г. Самарканд, ул. А. Темура 18.
Тел.: +998662333034, +998915497971
E-mail: **hepato_gastroenterology@mail.ru.**

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ЖУРНАЛ ГЕПАТО-ГАСТРОЭНТЕРОЛОГИЧЕСКИХ ИССЛЕДОВАНИЙ

Khusainova Shirin Kamiljonovna
Assistant of the Department 1 Pediatrics and Neonatology
Samarkand State Medical University,
Samarkand, Uzbekistan
Ahmedova Dilbar Yusufjonovna
Assistant of the Department 1 Pediatrics and Neonatology
Samarkand State Medical University,
Samarkand, Uzbekistan

IMPROVING TREATMENT OF COMMUNITY- ACQUE PNEUMONIA WITH ATYPICAL ETIOLOGY

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ANNOTATION

We have treated 68 sick children aged from 3 to 12 years old, hospitalized in departments 1 and 2 of pediatrics of the Samarkand branch of the Republican Scientific Center for Emergency Medical Care. The patients were divided into 2 groups. 34 patients were prescribed complex therapy, which included an antibacterial drug of the macrolide group - Clarithromycin, an antiviral and immunomodulatory drug Genferon at an age dosage for 10 days. Clinical manifestations of group I stopped almost 2 times faster than in patients from group II. The complex treatment of antibiotics and antiviral drugs for community-acquired pneumonia with atypical etiology has shown that they are more effective in preventing the recurrence of the disease and reducing the severity of pneumonia.

Keywords: treatment, atypical pneumonia, antibiotic therapy, antiviral drugs, children

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Хусаинова Ширин Камилджоновна
Ассистент кафедры 1 Педиатрии и неонатологии
Самаркандский государственный медицинский университет,
Самарканд, Узбекистан
Ахмедова Дилбар Юсуфжоновна
Ассистент кафедры 1 Педиатрии и неонатологии
Самаркандский государственный медицинский университет,
Самарканд, Узбекистан

СОВЕРШЕНСТВОВАНИЕ ЛЕЧЕНИЯ ВНЕБОЛЬНИЧНОЙ ПНЕВМОНИИ АТИПИЧНОЙ ЭТИОЛОГИИ

АННОТАЦИЯ

Нами пролечено 68 больных детей в возрасте от 3 до 12 лет, госпитализированных в отделения 1 и 2 педиатрии Самаркандского филиала Республиканского научного центра скорой медицинской помощи. Больные были разделены на 2 группы. 34 пациентам была назначена комплексная терапия, включавшая антибактериальный препарат группы макролидов Кларитромицин, противовирусный и иммуномодулирующий препарат Генферон в возрастной дозировке на 10 дней. Клинические проявления I группы купировались почти в 2 раза быстрее, чем у больных II группы. Комплексное лечение антибиотиками и противовирусными препаратами внебольничной пневмонии атипичной этиологии показало, что они более эффективны в предупреждении рецидивов заболевания и снижении тяжести течения пневмонии.

Ключевые слова: лечение, атипичная пневмония, антибиотикотерапия, противовирусные препараты, дети.

Xusainova Shirin Kamiljonovna
1-Pediatriya va neonatologiya kafedrasi assistenti
Samarqand davlat tibbiyot universiteti,
Samarqand, O‘zbekiston
Axmedova Dilbar Yusufjonovna
1-Pediatriya va neonatologiya kafedrasi assistenti
Samarqand davlat tibbiyot universiteti,
Samarqand, O‘zbekiston

ATIPIK ETIOLOGIYALI PNEVMONIYANI DAVOLASHNI TAKOMILLASHTIRISH

ANNOTATSIYA

Respublika shoshilinch tibbiy yordam ilmiy markazi Samarqand filiali 1 va 2 pediatriya bo‘limlarida 3 yoshdan 12 yoshgacha bo‘lgan 68 nafar bemor bola davolandi. Bemorlar 2 guruhga bo'lindi. 34 bemorga makrolid guruhining kompleks terapiyasiga antibakterial preparati - Klaritromitsin, virusga qarshi va immunomodulator hususiyatga ega bo’lgan Genferon preparati 10 kunga buyurildi. I guruhning klinik ko'rinishlari II guruhdagi bemorlarga qaraganda deyarli 2 baravarga tezroq yaxshiladi. Atipik etiologiyali pnevmoniya uchun antibiotiklar va virusga qarshi preparatlarni kompleks davolash ularning kasallikning qaytalanishining oldini olish va pnevmoniya og‘irlik darajasini pasaytirishda samaraliroq ekanligini ko‘rsatdi.

Kalit so'zlar: davolash, atipik pnevmoniya, antibiotik terapiyasi, virusga qarshi preparatlar, bolalar

Introduction. Pneumonia is an infectious and inflammatory lesion of the lung tissue, characterized by focal lesions of the respiratory sections with intraalveolar exudation [2,8]. Atypical pneumonias account for approximately 15-30% of cases of pneumonia in children and adolescents, and focal epidemic outbreaks in children's groups are possible [3]. Various microorganisms play a role in the etiology of the disease (these are bacteria, mainly cocci Streptococcus pneumoniae S.pneumoniae, Staphylococcus aureus (S.aureus), Haemophilus influenzae (H.influenzae), fungicis, viruses, protozoa. Among the “atypical” pathogens are Mycoplasma pneumoniae and Chlamydophila pneumoniae [1,3]. Pneumonia is a disease with a high risk of complications. According to world health organization (WHO) experts, pneumonia is the most common cause of death in children in the world, in particular, in the structure of mortality in children under 5 years of age, it is 17.5%, annually taking lives of approximately 1.1 million children in this age group [5]. It is especially difficult in children with malnutrition, chronic pathology, in children with reduced immunity. The immunopathogenesis of pneumonia is based on the inhibition of the activity of all parts of the immune system. Virus-induced immunosuppression can lead to severe and atypical course of bacterial infections, their generalization. In this regard, it is natural to raise the question of the validity of including drugs that normalize immunological reactivity in the complex therapy of pneumonia. In recent years, works by domestic authors have appeared that substantiate the feasibility and confirm the effectiveness of including antiviral and immunotropic therapy in the complex treatment of diseases of a bacterial nature, in particular, community-acquired pneumonia [4]. Interferons are the most important factor of immunity that provides protection of the body from a wide range of infectious agents [7]. Therefore, the use of synthetic interferon inducers is considered as a rational way to stimulate antiviral mechanisms, which has proven its worth both in preventing and in the complex treatment of acute respiratory viral infections. In this regard, the attention of researchers is attracted by the domestic low-molecular-weight interferon inducer-Genferon, which has antiviral, immunomodulatory and anti-inflammatory activity. There is reason to believe that the use of an interferon inducer as part of complex therapy should accelerate recovery and improve the prognosis for this disease.

Antibacterial and antiviral therapy form the basis of the etiotropic treatment of community-acquired pneumonia with atypical etiology. The problem of rational antibiotic therapy is one of the most urgent problems in pediatrics. The course and outcome of community-acquired pneumonia depends on the correct choice of an antibacterial drug at the onset of the disease. [6,9,10]. In pediatric practice, oral administration of antibiotics is preferred. Macrolide antimicrobials have been used in clinical practice for more than 50 years and during this time have proven to be highly effective and safest antibiotics.

The purpose of the research. To study the effectiveness of the use of antibacterial, antiviral and immunomodulatory drugs in children with reduced immunity in pneumonia with atypical etiology in children.

Materials and research methods. Depending on the prescribed therapy, we treated 68 sick children aged 3 to 12 years old, hospitalized in pediatric departments 1 and 2 of the Samarkand branch of the Republican Scientific Center for Emergency Medical Care. The patients were divided into 2 groups. 34 patients were prescribed complex therapy, which included an antibacterial drug of the macrolide group - Clarithromycin, an antiviral and immunomodulatory drug Genferon at an age dosage for 10 days. Clinical manifestations of group I stopped almost 2 times faster than in patients from group II. The complex treatment of antibiotics and antiviral drugs for community-acquired pneumonia with atypical etiology has shown that they are more effective in preventing the recurrence of the disease and reducing the severity of pneumonia. To establish the atypical etiology of community-acquired pneumonia, polymerase chain reaction (PCR) methods were used, which allows the detection and identification of bacteria without isolation of pure cultures, characterized by high diagnostic accuracy for the detection of atypical bacteria (M. pneumoniae, C. pneumoniae, Legionella spp.). For analysis, swabs were taken from the mucous membranes and sputum. The results of the dynamics of clinical manifestations and evaluation of the effectiveness of therapy were compared in two groups of patients during 10 days of observation.

Combined treatment was carried out for 7-14 days. Evaluation of the effectiveness of therapy was carried out on the basis of a study of the dynamics of the general condition of the child, clinical symptoms, such as cough, shortness of breath, physical changes in the lungs, radiological data.

Research results. Upon admission, the general condition was assessed in children of group I as moderate in 30 (88.2%), in 3 - severe (8.8%) and extremely severe in 1 (2.9%), and in children of group II moderate in 28 (82.3%), in 4 - severe (11.8%) and extremely severe in 2 (5.8%), which indicates a relatively similar severity of the condition in patients of both groups. According to the study of anamnestic data, 22 (64.7%) patients of the 1st group and 19 (55.9%) patients of the 2nd group were hospitalized on the 2nd-3rd day from the onset of the disease, 9 (26.5%) of the 1st group and 11-2 of the group - for 3 -5 days and 3 (8.8%) 1 groups and 4-2 groups - for 5-7 days. The results of the studies before treatment showed that 32 (94.1%) and 30 (88.2%) patients of the 1st and 2nd groups had a cough; 26 (76.5%) patients of the 1st group and 23 (67.6%) patients of the second group had hyperthermia, signs of intoxication; in 14 (41.2%) and 16 (47.1%) patients, respiratory failure of the 1st degree was observed. On the 3rd-4th day after the start of treatment, 22 (64.7%) children of the 1st group and 19 (55.9%) of the 2nd group showed positive clinical dynamics of the disease: manifestations of intoxication decreased, body temperature decreased. In 25 (73.5%) children of the 1st group and in 20 (58.8%) children of the 2nd group, the cough decreased - antibiotic therapy was continued. By the 5th-6th day of treatment, 32 (94.1%) children of the 1st group and 28 (86.6%) of the 2nd group had the disappearance of cough, shortness of breath, wheezing in the lungs. On the 10th day of treatment, there was a positive dynamics of hematological parameters. On the 10-12th day of therapy, wheezing completely disappeared in 33 (97%) sick children of the 1st group and in 30 (88.2%) of the 2nd group.

As can be seen from the results of examination and treatment of community-acquired pneumonia with atypical etiology in children, combined treatment with the use of antibacterial, immunomodulatory and antiviral drugs was accompanied by rapid positive dynamics. The children tolerated the combined treatment well, no adverse reactions were noted.

Conclusions. Thus, the use of antibacterial, immunomodulating and antiviral drugs is the most effective in the treatment of community-acquired pneumonia with atypical etiology in children. Ease of use, the presence of a drinkable form of drugs, high efficiency, and the absence of side effects make it possible to recommend this treatment for its widespread use in pediatrics. Based on the foregoing, the combined use

of drugs can be recommended for the treatment of patients with pneumonia

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