

**МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ
БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»**



МАТЕРІАЛИ

**104-ї підсумкової науково-практичної конференції
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Конференція внесена до Реєстру заходів безперервного професійного розвитку,
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вдосконалення індивідуальної верифікації щодо повної клініко-інструментальної ремісії захворювання.

Висновки. Показники ризику розвитку виразної гіперсприйнятливості дихальних шляхів у дітей, із фенотипом астми фізичного навантаження з повільним типом ацетилювання порівняно до представників групи порівняння підвищує відносний ризик даної події у 1,1 разів, при співвідношенні шансів 1,5 (95% ДІ 0,3-7,3).

СЕКЦІЯ 14 АКТУАЛЬНІ ПИТАННЯ ПЕДІАТРІЇ, НЕОНАТОЛОГІЇ, ДИТЯЧОЇ ХІРУРГІЇ ТА ОТОЛАРИНГОЛОГІЇ

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IMPROVEMENT OF THE INTENSIVE CARE OF FULL-TERM NEWBORNS WITH PERINATAL PATHOLOGY AND RENAL DISORDERS

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Introduction. Considering an important role of the urinary system in ensuring the stability of homeostasis in the whole organism and high occurrence of renal dysfunction formation in term neonates with pathological course of postnatal adaptation, the therapeutic tactics of patients of neonatal intensive care units requires a systematic approach and is directed to the protection of vital functions including prevention of severe renal injuries and their remote consequences. Therefore, **the objective of the study** is to improve a complex of intensive therapy of neonates with severe forms of perinatal pathology against the ground of functional disorders of the urinary system.

Material and methods. A comprehensive clinical-paraclinical examination of 100 term neonates with severe perinatal pathology was conducted. The main group included 60 babies. An improved therapeutic complex was administered for them. 40 children (the group of comparison) got common therapy. In addition to traditional measures to stabilize homeostasis the neonates from the main group were administered to “Aminophylline-H 200” preventing adenosine-induced renal vasoconstriction, and “Cytoflavin”, a drug of anti-hypoxic and anti-oxidant action.

Results. As compared to the traditional therapy administration of the advanced complex of treatment enabled to improve considerably the functioning of the urinary system in case of severe perinatal pathology, and decrease occurrence of acute kidney injury in particular. The benefits of this study were increase of hourly diuresis (3.2 ± 0.15 ml/kg/h and 2.2 ± 0.06 ml/kg/h, $p < 0.05$), decreased creatinine level in the blood serum (42.8 ± 1.19 and 48.2 ± 2.01 $\mu\text{mol/l}$ respectively, $p < 0.05$), enhanced glomerular filtration rate (52.5 ± 2.72 and 46.9 ± 2.51 ml/min/1,73m² respectively, $p < 0.05$), improvement of the main Doppler indices of the renal blood flow and stabilization of the body weight balance. Moreover, stimulation of the antioxidant effect was evidenced by considerable decrease of malone aldehyde in erythrocytes (15.7 ± 0.81 and 24.2 ± 1.21 $\mu\text{mol/ml}$ respectively, $p < 0.05$), increased activity of glucose-6-phosphate dehydrogenase in erythrocytes (3.1 ± 0.15 and 2.01 ± 0.10 $\mu\text{mol/min} \cdot \text{Hb}$ respectively, $p < 0.05$), glutathione reductase (3.13 ± 0.16 and 2.12 ± 0.11 $\mu\text{mol/min} \cdot \text{Hb}$ respectively, $p < 0.05$), and glutathione-S-transferase in the blood plasma (11.9 ± 0.59 and 8.24 ± 0.41 $\mu\text{mol/min} \cdot \text{mg protein}$ respectively, $p < 0.05$).

Conclusions. The results of the study were indicative of the reasonability of the suggested complex of treatment which is evidenced by normalization of the renal functions under conditions of perinatal hypoxia and reduced severity of the pathology in neonates at the early neonatal period.

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TREATMENT OF PILONIDAL SINUS IN CHILDREN

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Introduction. The incidence of pilonidal sinus (PS) is 26 cases per 100,000. Despite the great amount of proposed surgical techniques, the frequency of disease recurrence remains high.