



Horbatiuk I.B.

OPTIMIZATION OF CLINICAL DIAGNOSIS OF ACUTE TONSILLOPHARYNGITIS IN CHILDREN

*Department of Pediatrics and Children Infectious Diseases
Higher state establishment of Ukraine
«Bukovinian State Medical University»*

Administration of antibiotics in case of acute tonsillopharyngitis (ATP) is reasonable only when the disease is caused by β -hemolytic streptococcus of A (BHSA) group, although clinical confirmation of its etiology is rather complicated.

Objective of the study was improvement of the diagnosis of acute tonsillopharyngitis in children, considering the etiological factor and the clinical characteristics of the course of this disease.

102 children with acute tonsillopharyngitis were included in the study. The patients were divided in 2 groups. The first group included 68 patients with non-streptococcal acute tonsillopharyngitis (nATP), the second one – 34 children with streptococcal acute tonsillopharyngitis (sATP) with BHSA. The study was performed in the Children Regional Hospital, Chernivtsi, during the period 2014-2016. General clinical examination was performed in all the children, using MacIsaac, Centor probabilistic-orientation clinical systems. Constellation pattern of ATP was simulated by successive Waald's method in Kulbak's modification.

The use of MacIsaac and Centor probabilistic-orientation clinical systems with the total sum less than 3 points was indicative of non-streptococcal nature of the disease. They were also characterized by high specificity (93.9% and 90.9% respectively), but low sensitivity (12.5 % and 20.0% respectively), with predicted value of positive and negative results on the level of 50.0%. At the same time, the post-test probability of the event, that is, diagnosis of non-streptococcal acute tonsillopharyngitis, in case of a positive test increased with only 9.0%. It should be noted that according to the given diagnostic systems, with assessment score of 3 sensitivity and specificity of the test to find streptococcal ATP was not higher than 60%. The post-test probability of the event was increased by 9.0%.

MacIsaac and Centor probabilistic-orientation clinical systems with the total sum of less than 3 are indicative of non-streptococcal acute tonsillitis in children, with a high specificity, but low sensitivity. Therefore, according to our research, to reduce the risk of insufficient diagnosis of acute tonsillopharyngitis caused by β -hemolytic streptococcus when microbiological examination is not possible, a multilevel algorithm for its treatment should be used.

Khaschuk V.S.

EXPERIENCE WITH RESULTS OF ADHESIVE DISEASE'S TREATMENT IN CHILDREN AT CHILDREN'S CLINICAL CITY HOSPITAL

*Department of Pediatric surgery and Otolaryngology
Higher state educational establishment of Ukraine
«Bucovinian State Medical University»*

Scar tissue that develops between two organs will cause the surfaces of the organs to stick, or adhere, to each other. These bands of scar tissue are called adhesions. Thus, adhesive disease (AD) is defined as a condition in which scar tissue binds adjacent organs to one another. AD accounts for 2.4% of the total number of operations in abdominal surgery. Abdominal adhesions are fibrous bands that span two or more intra-abdominal organs and/or the inner abdominal wall (i.e. peritoneal membrane) which typically form after abdominal surgery. Adhesions may also form secondary to inflammatory conditions of the abdomen in the absence of prior abdominal surgery or as a sequela of abdomino-pelvic radiation. Although the majority of patients with intra-abdominal adhesions remain asymptomatic, a clinically significant subset of patients will develop "adhesive disease", a symptomatic state ranging from mild and/or vague to highly distressing and even life-threatening symptoms.



In Chernivtsi children's clinical hospital we use barrier compounds and preventive surgical methods in intraperitoneal adhesions treatment. The purpose of investigation it's explore the using of hyaluronic acid for the treatment and prevention of abdominal adhesions in children and long-term consequences.

Distribution of operated children with AD (age: 5-17 years, n=14). First group – 14 patients. Second group – 12 patients. Terms of supervision for children from 1 to 3 years. From 14 patients of AD: 4 (28.57%) operated on for early adhesive bowel obstruction, 10 (71.42%) - on late adhesive bowel obstruction. Recurrent AD was in 1 (7.15%) children.

In the I group (14 children) in the first year after surgery with adhesion syndrome turned 1 (7.15%) children). In the II group (12 children) adhesion syndrome over 3 years postoperative period turned 4 patients (33.33%), indicating the effectiveness of hyaluronic acid for the purpose for treatment of the adhesions abdominal cavity in children.

Thus, for treatment of adhesions of the abdominal cavity hyaluronic acid increase in tissue fibrinolytic activity of the intestine, which is a factor in preventing of fibrinous layers organization in connective tissue adhesions. Solution of hyaluronic acid is an effective remedy for adhesive intestinal obstruction in children and is accompanied by a relapse of the AD in 7.15% (n = 14 children), instead of in the group without its using - in 33.33% (n = 4 children).

Khlynovska L.Yu.

CLINICAL FEATURES OF GASTRO-THYROID COMORBIDITY IN CHILDREN

*Department of Pediatrics and Medical Genetics
Higher State Educational Establishment of Ukraine
«Bukovinian State Medical University»*

Children with chronic gastrointestinal pathology often have concomitant endocrine disorders, namely thyroid ones. Thyroid hormones affect the secretory function, repair of the mucous membrane of the gastroduodenal area, its motility, etc. Dyshormonal changes lead to disruption of gastric and duodenal mucosa blood supply and contribute to Helicobacter pylori infection.

The aim of the study was to study the clinical features of combined pathology of the gastrointestinal tract and thyroid gland in the pediatric population.

It was carried out a retrospective review of 542 case histories of gastroenterological patients of the Chernivtsi Regional Children's Hospital Chernivtsi. Among them in 56 children (10,3%) aged 7-18 combined pathology of the gastrointestinal tract and the thyroid gland was diagnosed. Particular attention was paid to the child's complaints about pain, its localization, origin, factors that exacerbate or reduce it, seasonality of pain, etc. Detection of a functional disorder or organic lesion of the gastrointestinal mucosa was based on an esophagogastroduodenofibrosopic examination. The acid-producing function of the stomach was evaluated by intragastric pH-metry. The thyroid gland state was evaluated by ultrasound examination. The functional activity of the thyroid gland was evaluated by T3, free T4, and thyroid-stimulating hormone levels.

All clinical gastroenterological symptoms were gathered and divided into basic syndromes – pain, dyspeptic and asthenovegetative. In the first place in the frequency of occurrence was pain syndrome. As a result of a survey of children found that all patients complained about abdominalgia. In most cases, the pain was constant, dull (84,2%), regardless of the duration of the disease, localized in the epigastrium and pyloroduodenal area (57,9%) and around the navel (4,1%), especially in young age children. Estimating the duration of pain, it was established that cases with persistent pain in the first 3 days of disease (86,4±1,4%) significantly predominated in comparison with cases when pain syndrome was not treated for 7-10 days (13,6±0,9 %) (p<0,01).

On the second place in frequency of occurrence was dyspeptic syndrome (73,7%). The most frequent complaints were belching (75,4%), heartburn (68,6%), nausea (59,3%), decreased appetite (83,1%), changes in stool consistency (47,3%). Manifestations of astheno-vegetative syndrome (52,5%) were rapid change of mood (63,6%), hand sweating (36,4%), fatigue (76,3%) and headache (61,9%).