



2016. By the clinical description, all *Salmonellas*' infected persons had typical clinical course, which described in guidelines and other data sources. Average hospital stay rate was 11.67 days. The peak of admission noticed from June to October that generally is usual for the Northern hemisphere for intestinal infections.

Most patients (63.2%–78.4%) had appealed for medical advice and had admitted within 72 hours of an illness onset annually. In all patients with acute onset symptoms of intoxication (a headache, weakness), fever of subfebrile degree had observed in 143 (37.6%) patients, febrile fever – in 208 (54.8%), and fever above 39° C – in 29 (7.6%). All mentioned above symptoms had accompanied with dyspepsia – nausea, repeated vomiting, epigastric pain with periumbilical and right iliac region location. The last bothered by frequent liquid stool 8-10 times a day, greenish with an unpleasant smell, and in 36 (9.5%) patients – stool mixed with mucus. Unfortunately, five persons hospitalized at fourth-fifth day of an illness onset a duty physician had marked signs of severe progressed dehydration with the development of acute renal failure (oliguria stage).

Comprehensive treatment of hospitalized patients had conducted under generally accepted recommendations that include detoxication, rehydration therapy with parenteral and oral saline solutions, substitute enzyme therapy, antibacterial drugs (nitrofurans with quinolones), probiotics (pre- with probiotic). After holiatry patients gradually improved condition: fever retained an average within 2-3 days, gradually decreasing symptoms of intoxication, and after 3-4 days of treatment stool became normal.

During the period 2011-2016 at the department of infectious diseases of Municipal medical institution «Regional Clinical Hospital» of Chernivtsi were treated 377 patients with gastrointestinal salmonellosis caused by *S. enteritidis* (327 cases), *S. typhimurium* (37 patients) and other rare salmonellas (13 cases). Typical clinical course in the most patients had noticed and severe gastrointestinal salmonellosis with acute renal failure and hypovolemic shock occurred rarely (in five persons per period), and was associated with the late appeal for medical help. According to the analysis of clinical and microbiological investigations for the mentioned period, a combined intestinal pathology involving various agents of bacterial, viral and fungal origin had confirmed in 55 patients, representing 14.7% among all the rest of mono-infection caused by NTS verified in 85.3% of cases.

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### **COMPREHENSIVE TREATMENT OF PYODERMA PATIENTS BY USING IMMUNOTROPIC AND PROBIOTIC DRUGS**

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Pyoderma is a widespread group of purulent-inflammatory skin diseases (from 15% to 40% in the structure of skin pathology in different regions of Ukraine). In recent years pyodermae have tended to widespread skin lesions, the development of chronic and deep forms, torpid to standard treatment methods. All this causes disability and impaired social activity of patients, determines an important medical and social role of pyodermae and the need to optimize the treatment of such patients. The current research found that the development of pustular skin diseases is due to the combined effect of exogenous (trauma, microtrauma, burns and skin scratching, etc.) and endogenous factors, such as endocrine, metabolic and hemodynamic disturbances. It was also found that changes in the immune system which are often secondary, arising against the concomitant somatic diseases, chronic foci of infection, including dysbiotic changes in microbiota of the colon play an important role in the development of chronic and deep forms of pyodermae.

The aim of the work was to improve the treatment of patients with deep and chronic forms of pyoderma by using immunotropic and probiotic drugs in their integrated therapy.

We have conducted a comprehensive survey of 47 patients with chronic pyodermae, 25 of them were men and 22 - women aged from 19 to 67 years. The 22 individuals were diagnosed with acne vulgaris of medium-severe and severe clinical course, in 9 patients chronic folliculitis was diagnosed, 7 of them had furunculosis, 4 with ecthymae, 3 - vulgar sycosis, and 2 - chronic ulcerative pyoderma. To assess the state of the immune system in patients with chronic pyoderma we applied immunological methods of determining quantitative values of cellular and humoral immunity by known techniques, the state of biocoenosis of the colon was studied by bacteriological method. The control group consisted of 25 practically healthy individuals (donors) of the similar age. Statistical data processing was performed on a PC using licensed software packages «Microsoft Excel» and «Statistica 6.0».

In patients with deep and chronic pyoderma a significant decrease in the number of common lymphocytes and their subpopulations with the phenotype CD3 + and CD3 + CD4 +, a rise in the level of fractions of the CIC and a decrease in the values of the phagocytic number, the NST test of spontaneous and stimulated, was found. In the course of treatment, 24 patients (comparative group) received standard treatment, while 23 patients (the main group) were administered an immunotherapy drug Immunomax and a multiprobiotic Symbiter, which consists of *Bifidobacterium*, *Lactobacillus*, *Lactococcus* and *Propionibacterium*. It was established that patients of the main group undergo more rapid regress of clinical manifestations of pyoderma and reduce the treatment period by 5 - 6 days compared to patients in the comparative group, as well as a more significant dynamics of immunological parameters: the probable increase in the number of immunocompetent cells with the phenotype of CD3+ CD4+ and phagocytosis and the reduction of IgM, IgG and CIC levels with the approach to control group indices.

Therefore, in patients with deep and chronic pyoderma signs of secondary immune deficiency, mainly T-cell population and processes of phagocytosis have been established. The administration of immunotropic (immunomax) and multiprobiotic (symbiter) drugs in their integrated therapy accelerates the regress of clinical manifestations of



pyoderma, as well as predetermines a more significant positive dynamics of immunological parameters of patients with deep and chronic pyodermae.

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### **COMPREHENSIVE TREATMENT OF PATIENTS WITH PSORIASIS BY USING PROBIOTICS AND A SYSTEMIC ENZYME THERAPY**

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Increasing the effectiveness of treatment for patients with psoriasis is an urgent task of modern dermatology. Psoriasis is a common chronic skin condition that afflicts more than 1 million people in Ukraine. According to clinical observations, psoriasis in recent years has been characterized by a more severe clinical course with frequent long-term relapse, the development of complicated forms of dermatosis (exudative, pustular, inverse psoriasis, etc.), which is the cause of prolonged disability and reduced social activity of patients. All these determine the important medical and social role of psoriasis and substantiate the relevance of improving the methods of its treatment.

The objective of the work was to improve the efficiency of treatment of patients with psoriasis by using probiotics and polyezymatic drugs in their comprehensive treatment.

The study involved 45 patients with psoriasis (27 men and 18 women) aged 24 to 73 years. 26 patients were diagnosed with psoriasis vulgaris (stationary or plaque-like), 19 patients had severe forms of psoriasis: 12 of them suffered from exudative form of psoriasis, 4 patients had inverse form, 3 individuals were with pustular psoriasis. To assess the clinical manifestations of psoriasis and to analyze the effectiveness of various methods of treating dermatoses in patients, the index of skin lesions and the severity of the psoriatic process - PASI were determined according to the generally accepted methodology. The mean value of the PASI index in the examined patients with psoriasis before their treatment was  $25.3 \pm 0.67$ . The condition of microbiota of the colon cavity in patients with psoriasis was determined, for which a microbiological study of feces was carried out by the classical method of inoculating feces on standard differential-diagnostic and selective growth medium.

According to the results of microbiological researches it has been established that a significant (77.8%) part of the examined patients with psoriasis undergoes changes in the qualitative and quantitative composition of the microbiota of the colon cavity, indicating the presence of dysbiosis in the colon cavity of such patients, mainly that of the second degree, with predominantly latent clinical course and which were more often found in patients with severe forms of psoriasis. In the process of treatment patients with psoriasis were divided into two groups which were similar by age, gender and clinical manifestations of dermatoses: I (comparative) - 22 persons who were prescribed a standard therapy for psoriasis, the second (main) group - 23 persons, who were additionally administered a probiotic drug "Symbiter acidophilic" (containing *Bifidobacterium*, *Lactobacillus*, *Lactococcus*, *Propionibacterium*) and a systemic polyenzymatic agent "Vobenzim", which is a combination of highly active enzymes of plant and animal origin with anti-inflammatory, antioxidant, immunomodulatory and resorptive actions. It has been established that application of probiotic (symbiter) and a systemic polyenzymatic agent (vobenzim) in the comprehensive treatment of psoriasis helps to normalize patients' intestinal microbiote as well as accelerates the regression of skin rashes with a probable decrease in of the PASI index in patients of the main group at the end of treatment compared to its initial value by 72.4% (in patients from the comparative group - by 52.7%).

Thus, the application of the probiotic and polyenzymatic drug in the comprehensive therapy of patients with psoriasis with manifestations of intestinal dysbiosis contributes to the normalization of the values of the intestinal microbiota in such patients, as well as it improves the clinical results of their treatment.

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### **MODERN ASPECTS OF COMPLEX TREATMENT OF ACUTE INTESTINAL INFECTIONS: POSSIBILITIES OF LACTOKEN USAGE**

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Morbidity of acute intestinal disease continues to be maintained at the leading position "rating" of infectious diseases, yielding only acute respiratory disease. From the epidemiological point of view, the situation is steadily worsening in developing countries, tropical areas and regions with low sanitary culture where there is a lack of drinking water, food quality, etc. According to the WHO terminology, acute intestinal infections - it diarrheal diseases, bringing together more than 30 nosology of bacterial, viral or protozoan etiology, leading symptom of which is acute diarrhea.

The aim of the research - to study the efficacy of lactogen usage in treatment of patients with acute intestinal disease.

A prospective clinical microbiological research design "case-control" was conducted in 2014 on the basis of department of infectious diseases at Chernivtsi regional clinical hospital (Northern Bukovina, a region in Western Ukraine) with 37 patients with acute intestinal infection. For etiological structure of all involved in the study cases distributed as follows: salmonellosis (*Salmonella enteritidis*) - 7 cases; Food poisoning caused by opportunistic microorganisms (*Citrobacter*, *Proteus*, *Staphylococcus aureus*, *S. pyogenes*) - 16; shigellosis - 2 patients. The age of the patients ranged from 22 to 72 years, the gender distribution was equivalent to almost 1:1.