

АКТУАЛЬНЫЕ ПРОБЛЕМЫ ТУБЕРКУЛЕЗА И ОЗДОРОВИТЕЛЬНОГО ПИТАНИЯ (кумысотерапия)

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FUNCTIONAL ACTIVITY OF THE THYROID GLAND IN PATIENTS WITH PULMONARY TUBERCULOSIS

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It was obtained new data that insufficient function of the thyroid gland (TG) can be a predictor more heavy lung TB course. Hypoxia of heavy stage can accompanies with dysfunction of the TG and causes mechanisms failure with the exhaustion of sympathoadrenal system as an immediate mechanism of stress-adaptation.

TG hormones exert an influence on immunity response forming & development of inflammatory reactions due to iodothyronin effects on cells activation of the monocytic-macrophage system both directly and indirectly. It is in turn may promote to elimination of TB pathogen from organism.

Spread destructive forms of lung TB accompanies more often by depression of the Th-1 helper response (responsible for the activity of macrophages, proliferation of T cells, synthesis of the IL-2, IFN γ and IL-6 production), and activation of Th-2 cells (responsible for humoral part of immunity and production of IL-4 and TNF- α). An increase of the IFN- γ level is more pronounce at spread destructive forms of lung TB, as well as, level of the IL-10 is less noticeable than at limited form.

Taking into consideration the fact that hormonal imbalance initiates immune disturbances of different stages the influence on peculiarities of clinic and course of TB process become obvious. The research results showed that finding of TG sonomorphology changes in part of patients with primary diagnosed lung TB indicate a high risk thyroid dysfunction hereby. It was established normal values of free thyroxin in TB patients with normal thyroid structure as well as its low level in the presence of TG pathology in the study of the hormonal profile. The level of thyroid stimulating hormone in patients with normal TG structure was within normal, and in patients with pathology-was increased. It had been shown that in patients who suffered from fibrous cavernous tuberculosis pathomorphology in thyroid is accompanied by its low activity and immunocytokin imbalance. It is manifested with reduced IL-4 level and a significant increased of the IL-1 production. According to results of ultrasonographic studies thyroid stroma varied from focal to diffuse proliferation of connective tissue and thickening of the interlobar septum, accompanied by compression and atrophy of some follicles.

At comparing treatment efficacy it was established that thyroid gland pathology has a negative impact on the recovery process. Meanwhile the clinical symptoms disappearance, conversion of MBT and the healing of cavities were faster in patients who had no thyroid pathology. However, these data are fragmented, not systematized, and require further study.

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EFFECT OF DEKASAN NEBULIZED THERAPY ON THE CLINICAL COURSE IN PATIENTS WITH COMMUNITY ACQUIRED PNEUMONIA

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At present, the use of nebulized inhalation of antimicrobial preparations is an effective method of pneumonia treatment. Inhalation therapy, especially in severe infiltrative processes in the lungs, let the effective delivery of drugs, having variety effects: anti-inflammatory, bronchodilatory, antibacterial and mucolytic, both conventional and high doses. A significant advantage of aerosol therapy is a high concentration of drugs in air ways at medications insignificant number itself, and low drug concentration in the organism as a whole.

Domestic medicine decamethoxin — Dekasan ("YURI-FARM") has a high bactericidal activity against gram-positive and Gram-negative, atypical and anaerobic bacteria; virusocidal effect on the lipophylic viruses; fungicidal action on various types of fungi and antiprotozoal activity (*Trichomonas*, *Giardia*). The treatment increases the sensitivity of Dekasan to antibiotic-resistant microorganisms to antibiotics. In addition, Dekasan has antispasmodic, hyposensencitiz, immunostimulant action, suppresses production of serotonin, providing anti-inflammatory and decongestant effects.

25 patients with community acquired pneumonia have been treated on the base of Pulmonology Chernivtsi Regional Hospital, who received the basic treatment (antibiotics, mucolytics, detoxication therapy) as well as Dekasan inhalation. 5 ml of a 0,02% Dekasan solution at room temperature via a compression nebulizer was used twice a day for 7 days for inhalation. After the treatment status patients has improved significantly: in 2-3 days the intensity and duration of cough have decreased as well as shortness of breath, sputum has become mucous character, the body temperature normalized, symptoms of intoxication have decreased. In patients with non-productive cough in 3-4 days the frequency and intensity of coughing have decreased. The obtained data al-