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**ESOPHAGEAL ATRESIA: PROBLEMATIC ISSUES
AND PROSPECTS FOR SOLVING THEM**

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Esophageal atresia (AS) is one of the complex congenital malformations of the gastrointestinal tract in children, which is manifested by a violation of the integrity of the esophagus with the formation of two segments that do not interconnect. Each of them may end up blindly or fistulas combined with the trachea, rarely the bronchi. This defect is incompatible with life, so such infants require immediate surgical treatment. The survival rate of children with AS is currently 95-98%. Frequent combinations with congenital heart anomalies (37%), other gastrointestinal abnormalities (25%), etc. (VACTERL Association) significantly reduce the chances of successful treatment.

Our aim was to determine the prevalence of AS among newborn children of Chernivtsi region and to establish current world trends in solving the problematic issues of this pathology.

A retrospective analysis of the case histories of newborns with birth defects, in particular, of inpatients treated in the surgical department of the KNP "City Children's Clinical Hospital" during 2008-2018, was carried out.

According to WHO, 4% of all birth defects in children account for the development of the gastrointestinal tract. In the territory of Chernivtsi region during the last ten years the uneven manifestation of this pathology has been noted. Yes, the highest number of children with AS was registered in 2010, 2011, 2013 and 2014 - 4 people. (9.7%), 4 people (8.3%), 5 people (10.2%) and 4 people. (8.5%) among all children with disabilities, respectively. All children underwent surgical intervention by right-sided thoracotomy with direct anastomosis by end-to-end type. The difficulty in performing this procedure has traditionally depended on the magnitude of the diastasis and the closely related search for trimmed ends.

The analysis of world sources shows the similarity of problems of both domestic and foreign authors. The magnitude of diastasis is the most important reason for refusing one-stage treatment with direct anastomosis. Thus, today, one of the most advanced methods of solving this problem is Falker prolongation, which is performed thoracoscopic and has a sufficiently low risk of developing postoperative complications, reaching 3-5%.

Current trends in world scientific thought are aimed at the development of mini-invasive technologies that have less traumatic consequences and better long-term results. The primary task of surgeons is to maintain the patient's own esophagus, even in the presence of an insatiable diastasis.

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**DIAGNOSTICS AND TREATMENT OF CHRONIC CONSTIPATIONS OF CHILDREN
WITH DOLICHOSIGMOID**

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The constipation is one of the most widespread disturbances of the function of digestive system, from 12% up to 19% of the population suffer from this disease. According to the Roman criteria III, the constipation is considered to be chronic, if symptoms are observed during period not less than 6 months. Typical symptoms of constipation are rare and hard feces, exertion, and feeling of incomplete emptying of the bowels. The hard feces, exertion and increase of intraperitoneal pressure can become the reason of such complications, as hemorrhoids, anal fistula and, probably, prolapse of the rectum, formation of the feces ulcer and feces accumulations with feces incontinence due to overflow bowel.

In a number of cases the excessive lengthening (dolichocolon) and distention (megadolichocolon) of the colon are underlying the chronic constipations. The term