



confirmed by the decrease of the index of leukocyte shift 39.87 %, the leukocyte index – 80.46 %, as well as a decrease in the ratio of lymphocytes and monocytes – 20.30 %; neutrophilic – lymphocytic coefficient – 47.13 %; the relation between neutrophils and monocytes –76.73 %; the correlation of agranulocytes and the rate of erythrocyte shedding – 82.23 % and the ratio of leukocytes and the rate of erythrocytes shedding – 46.5 %.

The increase of the value of the lymphocytic index 46.15 % and the lymphocytic granulocytic index 44.74 %, as well as the formation of a positive tendency of the immune system sensitivity increase to the agents of the infectious and inflammatory process 71.43 %, highlights the positive beginning of the formation of an adaptive specific protection, manifestations of which will be evident in 4-7 days. The use of immunotropic drugs for the activation of a specific immune response in patients with community-acquired pneumonia is discussed. The above cited shows that when examining the patient in the first stages of the development of hospitalized pneumonia in the active state there are factors and mechanisms of nonspecific protection, and the factors and mechanisms of specific immune protection begin to intensify to form the corresponding humoral and cellular immune response, depending on the taxonomic composition of the pathogen.

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ADAPTATIVE TENSION AND CELLULAR REACTIVITY LEVEL IN PATIENTS WITH PURULENT-NECROTIC PROCESSES OF SOFT TISSUES

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Purulent-necrotic diseases at the beginning of the XXI century remain an actual medical and social problem. Thus, during the last two decades, the share of this group of diseases remains rather high and has no positive tendency to decrease. The problem of hospital purulent-necrotic processes, occurring in hospitals of various profiles, where the treatment of patients with acquired immunodeficiency status is often carried out, has the particular significance.

The purpose of this research is to study the level of adaptive tension and cellular reactivity of the body of patients with purulent-necrotic processes of the soft tissues by immune-hematological indices and coefficients.

An immuno-hematological examination was conducted in 29 patients with purulent-necrotic processes of the soft tissues. The control group is represented by 14 practically healthy people of the corresponding age. Venous blood, studied on a hematological analyzer of the HB type, was taken for the research.

The blood system plays a leading role in ensuring the adaptive activity of the body. This role is determined, first of all, by the function of the transport of nutrients and oxygen - the main sources of energy for cells and tissues. The blood system is also one of the most important carriers of information concerning processes occurring on the level of tissue structures, and immunocompetent peripheral blood cells are very sensitive to changes in the external environment and internal state (illness, immunodeficiency state, etc.). Thus, changing blood parameters can expand or restrict the adaptive capacity of the body. Study of the level of the adaptive tension of the patients' body with purulent-necrotic processes of the soft tissues have shown that the adaptive index in patients increases 9.84 %, which confirms the positive prognosis for the clinical course of the disease. At the same time, in 3 patients (10.34 %) the value of the adaptation index is in the stress zone. Just in these patients the clinical course of the disease has a torpid course and transformation into a chronic process is possible.

Adaptive tension is closely related to the cell reactivity of the organism. Investigation of immune-hematologic indices, characterizing cell reactivity, also showed a significant increase. So, the leukocyte index of intoxication for Y.Ya. Calf-Caliph 49.02 % ($p<0.05$) for B.A. Rais - 94.57 %, the nuclear index of the degree of endotoxiosis - 4.11 times, the total leukocyte index of intoxication -70.45 % ($p<0.01$), as well as the overall indicator of intoxication - 39.74 % ($p<0.05$) showed the significant increase. Issues of use of different methods of treatment are discussed.

Thus, the level of non-specific adaptive tension and cellular reactivity of the patient's body increases in patients with purulent-necrotic processes of the soft tissues that must be taken into account when elaborating the methods of therapy for such patients. The questions concerning different methods of treatment are discussed.

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CELLULAR LINK OF NONSPECIFIC ANTI-INFECTIOUS REACTIVITY OF THE PATIENT'S BODY TO DIFFUSE GOITER

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The purpose of the study was to investigate the absolute and relative numbers of leukocytes, O-lymphocytes, natural killers (NK CD3+, CD16-), natural regulatory cells (NRC CD3+, CD25+), neutrophil granulocytes prepared for apoptosis with CD95+, phagocytic activity of neutrophil granulocytes, phagocytic peripheral blood capacity patients with diffuse toxic goiter.

Factors and mechanisms of non-specific reactivity of the organism are functioning in the human body continuously, causing in case of microbial or other destabilizing effect the formation of an inflammatory reaction that is similar to mechanism to different antigenic characteristics. The development of an infectious and inflammatory reaction contributes to the formation of specific immune response that can be considered as the development of the following, more adequate line of defense against genetically foreign substances, microorganisms, cells and other antigens.