

IMPROVEMENT OF METHODS OF DIAGNOSTICS AND TREATMENT OF CHLAMYDIAL PNEUMONIA IN CHILDREN

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Abstract.

Introduction. Pneumonia is dangerous not only for children but also for adults. First of all, it is connected with the risk of severe complications. One of the most common diseases in children is pneumonia, which occupies a worthy place in morbidity and mortality. The aim of this work was: to study the effectiveness of combined use of antibacterial and antiviral drugs for chlamydial pneumonia in children. Materials and methods of the study: 42 patients aged 3 to 14 years were observed, who were divided into 2 groups. 21 patients were prescribed complex therapy, including the antibiotic josamycin and the antiviral drug Viferon suppositories in age-appropriate doses for 7 days. For the diagnosis of atypical pneumonia for the purpose of correct study of the pathogen, laboratory methods are used: bacteriological culture of sputum, nasopharyngeal smears on a nutrient medium; ELISA, PCR. In the treatment of chlamydial pneumonia, macrolides are used as the main course for at least 7 days and as an additional course for 2 days after the disappearance of symptoms. According to the results of examination and treatment of chlamydial pneumonia in children, combined treatment with antibacterial and antiviral drugs was accompanied by rapid positive dynamics; Symptoms of intoxication were relieved on the 3rd day, cough and shortness of breath stopped on average on the 5th day, percussion changes in the lungs normalized on the 6th day, X-ray dynamics - on the 8-9th day. Children tolerated the complex treatment well, no negative reactions were noted. Symptomatic therapy is carried out at the same time; Complex treatment with antibiotics and antiviral drugs has shown that they are most effective in reducing the severity of the disease. Thus, in the treatment of chlamydial pneumonia in children, the combined use of antibacterial and antiviral drugs is effective. The ease of use, availability of the drinkable form of the drug, high efficiency and absence of obvious side effects allow us to recommend this method of treatment for wide use in pediatrics and for the treatment of patients with inflammatory diseases of the respiratory tract.

Key words: treatment, chlamydial pneumonia, children, complex treatment.

Muvofiqlik. Chlamydial pnevmoniya o'pkaning yuqumli va yallig'lanish kasalligi bo'lib, unda xarakterli bo'lmagan patogenlar - xlamidiya sabab bo'ladi. Atipik pnevmoniya umumiy buzulqlik, titroq, isitma, terlash, mushak og'rig'i, bosh og'rig'i va yo'tal belgilari bilan birga keladi. Og'ir holatlarda o'pka yurak etishmovchiligi rivojlanishi mumkin. [1,2,5]. Atipik pnevmoniya diagnostikasi epidemiologik tarixni, patogenni aniqlashni (ELISA, RIF, PCR, madaniyat va boshqalar) va ko'krak qafasi rentgenografiyasini hisobga olishni talab qiladi. Etiologiyani hisobga olgan holda, atipik pnevmoniyani davolash antimikrobiyal va antiviral preparatlar bilan amalga oshiriladi. Terapiyaning asosiy qiyinligi shundaki, atipik pnevmoniyani keltirib chiqaradigan ba'zi virusli patogenlarga qarshi samarali dorilar hali topilmagan [3,4,8]. Nafas olish kasalliklari bolalarda yuqumli patologiyalar tarkibida etakchi o'rinni egallaydi va bolalarda xlamidiya pnevmoniyasining eng yuqori darajasi kuzatiladi. Atipik pnevmoniyalar bolalar va o'smirlardagi pnevmoniya holatlarining taxminan 16-35% ni tashkil qiladi, bolalar guruhlarida o'choqli epidemiyalar paydo bo'lishi mumkin [6,7]. Ratsional antibakterial terapiya muammosi pediatriyaning eng dolzarb muammolaridan biridir. Jamiyat tomonidan olingan pnevmoniyaning kechishi va natijasi kasallikning boshlanishida antibakterial preparatni to'g'ri tanlashga bog'liq. [9,10]. Pediatrik amaliyotda og'iz orqali antibiotiklarga ustunlik beriladi. Antibiotiklarning yangi uzaytirilgan shakllari ulardan foydalanish chastotasini pasaytiradi, keng ta'sir doirasiga va past toksiklikka ega, bu ularni pediatriyada keng qo'llash imkonini beradi.

Maqsad: Bolalarda xlamidiyal pnevmoniya uchun antibakterial va virusga qarshi preparatlarni birgalikda qo'llash samaradorligini o'rganish.

Tadqiqot materiallari va usullari. Belgilangan terapiyaga qarab, 3 yoshdan

14 yoshgacha bo'lgan 42 nafar bemor 2 guruhga bo'linib, viloyat ko'p tarmoqli bolalar markazida statsionar davolandi. Chlamydial pnevmoniya jismoniy ma'lumotlar va rentgenologik belgilar o'rtasidagi nomuvofiqlik va penitsillinlar bilan antibakterial terapiyadan ta'sir etishmasligi bilan tavsiflanadi. Chlamydial pnevmoniyani faqat 2 proektsiyada ko'krak qafasi rentgenografiyasi yordamida aniqlash mumkin: bu o'pka to'qimalarining zaif yoki o'rtacha intensivlikdagi heterojen infiltratsiyasini, diffuz halqa shaklidagi va to'rtli elementlarning paydo bo'lishi bilan bronxial va qon tomir naqshning keskin o'zgarishini aniqlaydi.

Tadqiqot natijalari. Patogenni to'g'ri tekshirish uchun xlamidiya pnevmoniyasini tashxislash uchun laboratoriya usullari qo'llaniladi: balg'amning bakteriologik madaniyati, nazofarengal tamponlar; Elishay, radioimmunoassay, PCR. Asosiy guruhga yoshga qarab antibakterial va virusga qarshi preparatlarni buyurish bilan pnevmoniyadan kompleks terapiya olgan 21 nafar bola kirdi. Kombinatsiyalangan davolash 7 kun davomida amalga oshirildi. O'z vaqtida va etarli darajada etiotropik terapiya xlamidial pnevmoniyaning klinik ko'rinishlarining tez regressiyasiga yordam beradi. Shu bilan birga, radiografik o'zgarishlar uzoq vaqt davom etishi mumkin. Xlamidial pnevmoniyani davolashda josamitsin va Viferon shamlari asosiy kursda kamida 7 kun davomida buyurilgan. Bemorlarning 40 foizida pnevmoniya o'tkir respiratorli infeksiya belgilari boshlanganidan 3-kunida rivojlandi. Xlamidial pnevmoniya kursi odatda engil yoki o'rtacha. Tadqiqot natijalari shuni ko'rsatdiki, 1-guruhdagi 17 bemor va 2-guruhdagi 15 bemorda gipertermiya va intoksikatsiya belgilari mavjud. 1 va 2-guruhlardagi 17 va 16 bemorlarda yo'tal kuzatildi. 6 va 8 bemorlarda nafas qisilishi kuzatildi. Davolash boshlanganidan keyin 4-kuni 1-guruhdagi 18 nafar va 2-guruhdagi 16 nafar bola kasallikning ijobiy klinik dinamikasini ko'rsatdi: intoksikatsiya belgilari kamaydi, ishtahani normallashtirdi, tana harorati normallashti. Davolashning 5-kuniga kelib, 1-guruhdagi 19 nafar va 2-guruhdagi 16 nafar bolada nafas qisilishi va xirillashlar yo'qolgan. Qiyosiy tahlilda o'pkadagi jismoniy o'zgarishlar sezilarli farqlarni ko'rsatmadi, ular standart terapiya olgan bemorlarda o'rtacha 0,5 kun tezroq normallashti. Natijada, dori vositalaridan foydalanish kasalxonaga yotqizish muddatini sezilarli darajada qisqartirdi, shuning uchun 1-guruhdagi bemorlar 2-guruhdagi bemorlarga qaraganda klinikada o'rtacha 1,2 kun kamroq vaqt o'tkazdilar. Bolalarda xlamidial pnevmoniyani tekshirish va davolash natijalaridan ko'rinib turibdiki, antibakterial va antiviral preparatlar bilan birgalikda davolash tez ijobiy dinamika bilan birga bo'ldi; Intoksikatsiya belgilari 3-kuni to'xtadi, yo'tal va nafas qisilishi o'rtacha 5-kuni to'xtadi, o'pkada perkussion o'zgarishlar 6-kuni normal holatga keldi, rentgen dinamikasi 8-9-kuni. Bolalar kompleks davolashni yaxshi qabul qilishdi, hech qanday salbiy reaksiyalar qayd etilmadi.

Xulosa. Shunday qilib, bolalarda xlamidial pnevmoniyani davolashda antibakterial va virusga qarshi preparatlarni birgalikda qo'llash samarali bo'ladi. Foydalanish qulayligi, preparatning ichimlik shaklining mavjudligi, yuqori samaradorlik va aniq nojo'ya ta'sirlarning yo'qligi ushbu davolash usulini pediatriyada keng qo'llash uchun tavsiya qilish imkonini beradi va yuqori bo'limlarning yallig'lanish kasalliklari bilan og'rigan bemorlarni davolash uchun tavsiya etiladi. va pastki nafas yo'llari.

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