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Purpose: Achalasia of the esophagus is a rare disorder in children, its symptom can mimic common childhood illnesses. In this study, the tactics of managing children with the corresponding pathology and evaluating the effectiveness of ongoing surgical treatment at the Filatov Children Hospital are considered.

Materials. From 1991 to 2016, in the Filatov Children Hospital was treated 39 patients with achalasia. Since 2011, all patients (27 cases) have undergone laparoscopic Heller cardiomyotomy with Dor fundoplication. The average age was 9.9 (4-15) years. The most frequent symptoms were vomiting (81%) and dysphagia (70%). Weight loss was observed in 48.1% of patients and chronic cough in 25%.

Results. All children underwent laparoscopic Heller cardiomyotomy with Dor fundoplication. Intraoperative complication - damage to the mucosa of the esophagus occurred during cardiomyotomy in 2 cases (7.4%), which were cured during the laparoscopic procedure. There were no open procedures. Six (22.2%) required repeated intervention: pneumatic dilations (n = 2), balloon dilatation (n = 2) and re-surgery (n = 2).

Conclusions. In our study, laparoscopic Heller cardiomyotomy in the case of achalasia of the esophagus is effective in 77.8% of children. We recommend this operation with Dor fundoplication, and believe that it is the operation of choice in the treatment of achalasia in children.

VALUE OF EARLY DIAGNOSIS OF DISEASES OF THE URINARY SYSTEM AT NEWBORNS AND CHILDREN OF THE FIRST MONTHS OF LIFE

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Relevance. The number of children of early age with congenital urological pathology, in particular obstructive uropathy, steadily grows and is registered at 5–14% of newborns.

The aim of research: to improve results of treatment of children with urological pathology by improvement of diagnostics and optimization of terms surgical treatment.

Patients and methods. On the basis of department of children's surgery of the Tyumen State Medical University the analysis of results of treatment of 117 children with obstructive uropathy (boys-75 (64%), girls - 42 is carried out (36%). Patients were divided into two groups. The first group made 44 (38%) the child at which pathology of an urinary system was revealed after the birth, already at accession of complications (temperature increase of a body, a leukocyturia and a gematuriya, pains in lumbar area). Age range of these patients made from 1 to 15 years. The second group - 73 (62%) newborns. Pathology at them was revealed in antenatal period by means of a ultrasound sonography. Treatment to these patients was carried out from the first days of life.

Results. Early detection of this pathology and timely surgery before emergence and accession of a secondary infection of an urinary system improved results of treatment of these patients, having reduced quantity of complications from 28.3% to 1,4%.

Conclusion. Early detection of this pathology created prerequisites for early surgery before emergence and accession of a secondary infection of an urinary system. This circumstance is decisive in prevention of postoperative complications, and also the satisfactory immediate and remote results of treatment.