

WAYS OF INCREASING EFFICIENCY OF ANTIBACTERIAL THERAPY AT THE FESTERING-INFLAMMATORY DISEASES AT CHILDREN

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Introduction. One of the reasons of unfavorable results of treatment is low efficiency of antibacterial therapy. One of the new perspective therapeutic strategies is the application of extracorporeal antibacterial therapy (EABT) providing the directed transport of drug in the hearts of inflammation.

Aim. Improving the results of treatment of patients with a heavy festering infection.

Materials and methods. From 2005 to 2017 101 operations of EABT were conducted at 35 children with heavy infections: peritonitis, osteomyelitis, destructive pneumonias, urology pathology, sepsis. Auto leucocytes and red corpuscles were used as the vectors of the directed transport AB.

Children were given a preliminary infusion in a volume of 10-15 ml/kg with balanced crystalloid solutions. After taking away blood in amount of a 10% from VCB, it was centrifuged. Then the day's dose of the chosen antibiotic (in accordance with the sensitiveness of microorganisms) was added to cellular mass. The cellular mass was diluted by physiologic solution and poured to the patient. Remote plasma after conducting of session of discrete plazmaferes was returned to the patient. (stat. patent No. 38834). Extracorporeal antibacterial therapy was conducted in one day for 1-3 sessions with subsequent transition on descalation antibacterial therapy.

Results. Duration of stay in intensive therapy and general duration of stay in the permanent establishment are lower in a basic group compared to a control group. The normalization of leucocytes formula of blood and quicker (on the average on 2-3 days) normalization of temperature of body at patients were established.

Conclusion. EABT, being one of the variants of the directed transport of medications is the effective method of treatment of heavy festering infection at children.

RECONSTRUCTIVE SURGERY OF CHEST MALFORMATIONS IN CHILDREN

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Introduction. Chest deformities occur approximately in 1-2% of the population. During the growth of the organism chest deformities aggravate, press and deviate the heart and lungs, causing disorders of the respiratory and cardiovascular systems. Thoracoplasty is a pathogenetic surgery.

Purpose. Improvement of the quality of life of children with chest deformities, by the application of advanced technologies in surgical treatment.

Material and methods. In the Clinic of Pediatric Vertebrology, Orthopedics and Traumatology during the years 2012-2015, 21 children aged between 5 and 14 years old with congenital chest malformations were operated: 12 (57.1%) children with excavated chest, 9 (42.9%) patients with chest deformity caused by scoliosis with „thoracic hypoplasia syndrome" -14 boys (66.7%) and 7 girls (33.3%).

Results. Good results (no complaints, functional disorders of the lungs and heart are not obvious, chest deformation was removed) - were observed in 19 (90.5%) patients. Satisfactory results (a slight deepening in the anterior wall remains, there are no complaints) - 2 (9.5%) patients.

Conclusions.

1. Conservative treatment or delayed surgical treatment led to irreversible disorders and complications of the functions of internal organs.
2. Surgical correction of severe chest deformities is the only method that allows to prevent the progression of internal organs dysfunctions.
3. Mini invasive Nuss procedure is the most beneficial method of correction of deepening chest deformities.