S.pneumoniae, Bacteroides spp., S.epidermidis, M.catarrhalis, H.influenzae, Prevotella spp., S.viridans, S.pyogenes, S.aureus and others.

Therefore, the severity of type 1 diabetes in patients with CPRS negatively affects the species composition, population level, qualitative and quantitative dominance of autochthonous obligate and facultative, as well as allochthonous for the habitat of microorganisms and their associations. The above may indicate the influence of not only the etiological agent, but also a certain association of microorganisms on the severity of CPRS with type 1 diabetes mellitus, which must be taken into account when choosing etiotropic treatment.

Popeliuk N.O.

FEATURES OF DIAGNOSIS AND TREATMENT OF ATYPICAL RESPIRATORY DISEASES IN CHILDREN

Department of pediatrics, neonatology and perinatal medicine
Bukovinian State Medical University

Respiratory infections occupy a leading place in the structure of morbidity in children of early age around the world. At an early age, there is a functional immunodeficiency condition, which is called immunodeficiency maturation. The proportion of acute respiratory viral infections (ARI) is 65% of all registered diseases. SARS is commonly developed against the background of various pathological states, among which functional disorders of the digestive system are the most common.

An urgent problem is a significant violation of functional disorders in SARS, which is manifested by the deterioration of the processes of secretion and absorption.

The work aims to optimize the treatment of SARS in children with functional disorders of the digestive tract.

According to the data of the pediatric department of the City clinical hospital, 616 children were treated for SARS in 2019. Among patients of an early age group, constipation made up 24.5%, intestinal colic - 22.9%, tendency to loose stools - 19.4%, vomiting - 16.3%. Macroscopically in the stool of 32.0% of children mucus and undigested food remains were observed. The patients with digestive system disorders required a gentle approach to the treatment of SARS. The use of drugs of natural origin that stimulate local factors of immune protection was more preferable. The main effect is to increase the production of interferon and lysozyme, and also to promote the production of immunoglobulins.

Patients were divided into two groups according to the tactics of therapy. In 319 patients the inducers of interferonogenesis - proteflazidum in combination with laferon intramuscularly and/or endonasal were used. In 297 children the treatment with isoprinosine orally started in the outpatient phase, was continued.

Clinical criteria for the effectiveness of therapy were the reduction of intoxication, decrease, and normalization of temperature, reduction of hospitalization period. In both groups, there was no significant difference in the duration of symptoms of patients' intoxication, catarrhal manifestations, or complications of SARS (ear inflammation, bronchitis, acute stenotic laryngitis). In the first group complications of SARS occurred in 19.2% of patients, in the second group, respectively - 20.8%. Instead, in the group of children receiving isoprinosine drugs orally, the period of hospitalization was longer by 2 days and made up 9.04 ± 0.6 days due to the development of gastrointestinal side effects, manifested by diarrhea, flatulence, or vomiting on the provoked premorbid condition.

Thus, a gentle approach to the treatment of SARS in children with functional disorders of the digestive system demonstrated high efficiency, especially in children in the first year of life. A combination of proteflazidum in combination with laferon may be suggested as an optimal approach to the treatment of SARS in children with functional disorders.