МІНІСТЕРСТВО ОХОРОНИ ЗДОРОВ'Я УКРАЇНИ БУКОВИНСЬКИЙ ДЕРЖАВНИЙ МЕДИЧНИЙ УНІВЕРСИТЕТ»



МАТЕРІАЛИ

105-ї підсумкової науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу БУКОВИНСЬКОГО ДЕРЖАВНОГО МЕДИЧНОГО УНІВЕРСИТЕТУ присвяченої 80-річчю БДМУ 05, 07, 12 лютого 2024 року

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Матеріали підсумкової 105-ї науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) – Чернівці: Медуніверситет, 2024. – 477 с. іл.

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У збірнику представлені матеріали 105-ї підсумкової науково-практичної конференції з міжнародною участю професорсько-викладацького персоналу Буковинського державного медичного університету, присвяченої 80-річчю БДМУ (м. Чернівці, 05, 07, 12 лютого 2024 р.) із стилістикою та орфографією у авторській редакції. Публікації присвячені актуальним проблемам фундаментальної, теоретичної та клінічної медицини.

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IMPROVING THE TREATMENT OF PATIENTS WITH ALLERGODERMATOSES CONSIDERING THE CLINICAL MANIFESTATIONS OF THE DISEASE AND THE STATE OF THE COLON MICROBIOTA

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Introduction. Allergodermatoses are a common group of allergic skin diseases, which in recent years have a tendency to a more severe clinical course with widespread skin damage and acute inflammatory manifestations. They have a long course, often resistant to basic treatment, which is the reason for a decrease in patients' ability to work and social activity. All this substantiates the relevance of increasing the effectiveness of treatment of patients with allergic dermatoses, considering the pathogenetic mechanisms of their development and course. Allergodermatoses are found to be multifactorial diseases. Changes in the immune and endocrine regulation, diseases of the digestive organs, foci of chronic infection, in particular intestinal dysbiosis, skin microcirculation disorders, etc., are important in their development. It should be taken into account when prescribing comprehensive treatment for this group of patients.

The aim of the study. Increase the effectiveness of treatment of patients with allergic dermatoses, considering the clinical manifestations of the disease and the state of the colon microbiota.

Material and methods. 62 patients with allergic dermatoses (35 men, 27 women) aged from 20 to 79 years were examined. Eczema was diagnosed in 48 patients (idiopathic eczema in 17; microbial forms of eczema in 31), and atopic dermatitis (exudative or lichenoid forms) in 14. All the patients had widespread dermatosis with acute inflammatory manifestations. In the process of the study, microbiological (determining the state of the colon microbiota) and statistical research methods were used.

Results. In the majority (49 people - 79.03%) of the examined patients with allergic dermatoses, changes in the qualitative and quantitative indicators of the colon microbiota with signs of dysbiosis of various degrees of severity were found, mainly II and III degrees (in 30.6% and 26.5% of patients respectively). More pronounced manifestations of intestinal microbiota dysbiosis were found in patients with microbial forms of eczema. In the course of treatment, patients with allergic dermatoses were divided into two groups: the comparative group - 32 patients who were prescribed standard treatment, and the main group - 30 patients who were prescribed a multiprobiotic (containing bifidobacteria, lactococci, lactobacilli, propionic acid and acetic acid bacteria) against the background of standard therapy. An angioprotective drug containing diosmin and hesperidin and an enzyme drug containing serratiopeptidase, producing anti-inflammatory and antiedematous effects, were administered. According to clinical observations, patients with allergic dermatoses from the main group experienced a reduction in hyperemia and swelling earlier, and eczema patients experienced a cessation of wetting in the foci of skin lesions with a reduction in the duration of their treatment (on average by 5-7 days), as well as the tendency to normalize the colon microbiota. After treatment, among patients with allergic dermatoses of the comparison group, the state of clinical recovery was registered in 11 (34.4%) patients, significant improvement or improvement in 21 (65.6%) patients. Among patients in the main group, these findings were 19 (63.3 %) and 11 (36.7%) patients respectively. According to Friedman's non-parametric analysis of variance, it has a significant difference ($\chi^2 = 5.20$ for the critical value of this indicator – 3.84) and indicates much better clinical results of treatment of patients from the main group.

Conclusions. The use of a multiprobiotic, an angioprotective preparation containing diosmin and hesperidin, and an enzyme preparation containing serratiopeptidase against the background of standard therapy by patients with allergic dermatoses with acute inflammatory manifestations on the skin and the presence of intestinal dysbiosis contributes to the normalization of the colon microbiota of the colon, and reliably improves clinical results of treatment of this group of patients.