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PREDICTORS OF DEVELOPMENT OF BRONCHIAL ASTHMA IN CHILDREN

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Introduction: currently, according to statistics, about 5–15% population of child suffers from bronchial asthma (BA) in the world.

Often BA is hiding under the mask of respiratory infection with bronchial obstructive syndrome, respiratory allergy and/or recurrent long term unproductive cough. These disease as a predictors of risk developing BA in children. Actuality of this is an early diagnosis and timely treatment BA in children.

Persistent and/or atypical respiratory infections, such as mycoplasma infections often give clinical symptoms of BA in children.

Aim: Differentiate predictors of the risk of developing asthma from mycoplasma infection in children.

Materials and methods: We examined 106 children, age 1 to 16 years, who were hospitalized in the allergy and pulmonology departments of the 1st clinic of TMA. Among them are children with BA (n = 35), obstructive bronchitis (OB) (n = 38), allergic rhinitis (AR) (n = 33). All children underwent the following set of examinations: anamnesis of patients (life, illness, allergy history), study of

medical documentation (outpatient cards, medical history), laboratory tests (CBA, CUA, IgE, blood for mycoplasma IgG), spirometry and / or peak flow measurement; radiography of the chest.

Results. 43.4% of children were diagnosed with BA. A history of 62.8% of children had frequent episodes of OB, 45.4% had a long unproductive cough, difficulty in nasal breathing.

Mycoplasmal infection (IgG) was detected in 42.4% with BA, in 36.8% OB, in 54.5% with prolonged unproductive cough. According to the history of these children before admission to the hospital research on mycoplasmal infection was not performed.

Conclusion: On the basis of the obtained results, it can be concluded that mycoplasma infection often occurs under the guise of a BA, OB, or long-term unproductive cough. Overdiagnosis of these diseases leads to improper and untimely treatment of mycoplasma infection. All children with prolonged cough are advised to test for the presence of antibodies against mycoplasma.