

THE ROLE OF STIMULATION THE LOCAL COMMUNITY IN THE COMPLEX CONSERVATIVE TREATMENT OF THE CHRONIC COMPENSATED TONSILLITIS IN CHILDREN

L.A. Danilov*

State University of Medicine and Pharmacy "N. Testemitanu", Chisinau, Moldova

*E-mail: luciano@mail.md

Introduction: The fight with the local chronic infection of palatine tonsills, causing local and general pathological changes are considered a priority in the practical medicine. Methods of stimulation local immunity in the chronic inflammatory processes of the body are considered very actual today.

Aim: The analysis of efficacy of the complex conservative treatment in the chronic compensated tonsillitis in children by researching microbial flora on the surface of tonsills before and after conservative treatment complex.

Methods: The study included 40 children with chronic compensated tonsillitis, which have been divided into two equal lots. The first lot of children with conservative treatment included: washing gaps of the tonsills with sol.Furacilină, sprinkling them with sol. Lugol, infiltration of the peritonsillar space with activated autolimfocitis, administration the desensitizing preparations, therapy with vitamins. Patients in second group have received the same treatment, but without local stimulation. Patients were taken smear the bacterial flora and its sensitivity to antibiotics before and after conservative treatment (over 6 months).

Results: On the surface of tonsills of the children in first group (the mean age is 11.8 years) prevailed following flora: staphylococcus aureus -56.2 %, streptococcus B- hemolytic gr.A - 12.5 %, streptococcus B- hemolytic gr. C - 6.5 %, streptococcus pneumoniae - 6.3% , in 12.5 % of cases flora was not detected. After treatment on the surface of the palatine tonsills prevailed staphylococcus aureus - 72.2 % of cases , streptococcus pneumoniae - 11%. In 6 % of patients flora was not detected. In second group of children (the mean age is 11 years) before treatment prevailed following flora: staphylococcus aureus - 40 %, streptococcus B- hemolytic gr.A - 10%, streptococcus B -hemolytic degrees C - 10%, streptococcus pneumoniae - 10% , there has not been flora in 20% cases. After treatment staphylococcus aureus remained the same - 40 % of cases , streptococcus B -hemolytic gr.A was found in 15% cases, streptococcus B -hemolytic gr.B - 10% and in 30 % of cases flora was not detected. Antibiotic sensitivity to antimicrobial agents of children in both groups, before and after treatment was approximately the same: the sensitive in most cases was to cephalosporin and amoxicillin + clavulanic acid - 85% - 95 % of the cases , less sensitive to macropene - 70 - 80 % of cases and quite resistant to penicillins - 40-50 % of cases. Patients in the first group, positive clinical dynamics appreciated in 90 % of cases, which is characterized by the absence of acute respiratory infections of the upper respiratory tract, tonsills decrease in volume and lack of caseous masses in the gaps of tonsills. In second group of children, positive effect of treatment was assessed in 80 % of cases.

Conclusion: The application of stimulation for local immunity by application activated autolimfocitis in peritonsillar space in the complex treatment of chronic compensated tonsillitis in children, favors the reduction of the presence streptococcus B- hemolytic in tonsills and positive clinical dynamics better.