

including the using of drugs with anticytokine activity. It is necessary to take into account that negative "pulmogenic" effects of the main etiological factor of COPD - smoking is largely realized through the stimulation of synthesis of proinflammatory cytokines.

The aim of investigation: to motivate an expediency of lipoflavon application in the complex treatment of severe forms of chronic obstructive pulmonary disease in individuals with long period of smoking for the correction of cytokine homeostasis.

We observed 122 patients with COPD, who were divided into 3 groups: group 1 included 42 patients with COPD of III degree of severity, never smoked, the 2nd group - 46 patients with COPD of III degree of severity who had smoking history of more than 10 years. The third group consisted of 34 patients with COPD of III degree of severity who had smoking history of more than 10 years and in their complex treatment was included lipoflavon by 2 bottles (1 bottle contains 15 mg of quercetin and 550 mg of lecithin-standard; auxiliary substance - lactose), produced by "Biolek" 1 per day intravenously (slowly) in 20 ml isotonic solution (prewarmed to 37- 39 C) 3 times. The patients in group 2 who did not receive lipoflavon injections were a control for group 3 patients .

We found that increase of IL-1 β level in the systemic circulation is a common feature of clinical course COPD of III degree of severity: IL-1 β level increased by 61.4% ($p < 0.001$) in patients of group 1 and by 87.5% in patients of group 2 ($p < 0.001$, $p_1 < 0.001$). It is noteworthy that in patients with a long period of smoking (group 2), cytokine levels were significantly higher than in nonsmoking patients (group 1). The level of proinflammatory cytokine TNF- α (associated with the realization of the cytokine-mediated NF- κ B-dependent change to chronic inflammatory process in the bronchi and the deformation of bronchial tree in COPD) increased by 50.5% ($p < 0.001$) in patients of group 1 and by 75.5% in patients of group 2 (p and $p_1 < 0.001$).

Thus we have shown that long period of smoking is a risk factor for increasing systemic cytokine potential in patients with COPD of III degree of severity that is considered as an important pathogenetic mechanism for change of nonspecific inflammatory lung disease to chronic and progressive.

IL-1 β and TNF- α levels in the systemic circulation did not differ in patients with 2nd and 3rd groups at admission to hospital. It was also found that under the influence of the patients treatment (which did not include drugs with proved anticytokine action) in group 2 indicators IL-1 β and TNF- α were not significantly changed and in patients of group 3 who received a course of lipoflavon injections the levels of

IL-1 β and TNF- α decreased by 25.8% ($p < 0.001$) and 17.4% ($p < 0.001$) correspondingly.

These laboratory parameters changes were accompanied by positive clinical symptoms: a decrease of dyspnea, cough, and manifestations of hypokinetic type of central hemodynamics, and facilitating sputum discharge and /or reduction of its daily volume.

Thus we have proved the clinical efficacy of lipoflavon for correct levels of proinflammatory cytokines IL-1 β and TNF- α in patients with COPD who had a long period of smoking.

ПАТОГЕНЕТИЧЕСКИЕ АСПЕКТЫ ПРОФИЛАКТИКИ РАЗВИТИЯ МУЛЬТИРЕЗИСТЕНТНОГО ТУБЕРКУЛЕЗА

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Основной причиной селекции мультирезистентного туберкулеза является использование в интенсивной фазе менее 4 противотуберкулезных препаратов и неполном использовании рекомендуемых патогенетических средств. По оценкам Всемирной организации здравоохранения в Украине мультирезистентный туберкулез встречается у 16% впервые выявленных больных и у 44% больных с повторным туберкулезным процессом. При туберкулезе поражаются все органы и системы организма больного с выраженными функциональными нарушениями. Наиболее чувствительны к туберкулезной интоксикации сердечно-сосудистая, бронхолегочная, иммунная, эндокринная, кроветворная, мочеполовая и нервная системы. Лечение таких больных представляет очень сложную проблему, особенно в настоящее время, когда много больных поражены устойчивыми к противотуберкулезным препаратам штаммами возбудителя туберкулеза, часто на фоне ВИЧ инфицированности. С целью повышения эффективности лечения больных туберкулезом в стандартную схему лечения, по разработанной нами методике, мы ввели препараты серии «Биотроф», которые обладают свойствами улучшающими процессы регенерации, ранозаживления, кроветворения, нормализующие функцию органов и систем.

Для усиления первой фазы лечения был применен полиоксидоний (водорастворимое производное гетероцепных алифатических полиаминов – данный класс соединений не имеет аналогов в мире как по структуре, так и по свойствам), обладающий выраженной иммуномодулирующей активностью и дезинтоксикационными свойствами. Больные в количестве 61 человек были разделены по требованию доказательной медицины на 2 группы (33 чел. - исследуемая и 28 - контрольная). Проведен динамический комплекс исследований до и в процессе лечения. Общеклинические исследования: общий анализ крови, общий анализ мочи, функциональные пробы печени (билирубин, аминотрансферазы, тимоловая проба, β - липопропротеиды); анализ мокроты на наличие микобактерий туберкулеза (МБТ) и определение чувствительности МБТ к противотуберкулезным препаратам; специальные биохимические исследования: общая протеолитическая активность крови, ингибиторы протеаз, лизоцим, элстаза.

Иммунологические исследования: иммуноглобулины класса А, уровень CD 3+ лимфоцитов. Полученные данные свидетельствуют о достаточно высоком проценте негативации мокроты, более ранних сроках заживления деструкций, незначительном количестве побочных реакций, значительном улучшении изученных показателей с малыми остаточными изменениями в легких, небольшом проценте развития резистентных штаммов МБТ.

PATHOGENETIC ASPECTS OF PREVENTIVE MAINTENANCE OF DEVELOPMENT OF THE MULTIRESISTANT TUBERCULOSIS

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Principal cause of selection of multiresistant tuberculosis is used in an intensive phase less than 4 antitubercular preparations and incomplete use of recommended pathogenetic means. By World Health Organization estimations in Ukraine the multiresistant tuberculosis meets at 16 % for the first time the revealed patients and at 44 % of patients repeated tubercular process. At tuberculosis all bodies and systems of an organism of the patient with the expressed functional infringements are surprised. Cardiovascular, bronchopulmonary, immune, endocrine, hematopoietic, urinogenital and nervous systems are most sensitive to a tubercular intoxication. Treatment of such patients represents very much a challenge, especially now when many

patients are amazed steady against antitubercular preparations strains the tuberculosis activator, is frequent against a AIDS infection. For the purpose of increase of efficiency of treatment sick of tuberculosis in the standard scheme of treatment, by the technique developed by us, we have entered preparations of a series "Biotrof" which possess properties improving regeneration processes, wound healing, hematopoiesis, normalising function of bodies and systems.

To strengthening of the first phase of treatment has been applied polyoxidonium (water-soluble derivative heterochain aliphatic polyamines - the given class of connections has no analogues in the world both on structure, and on properties), possessing expressed immunomodulatory activity and disintoxicational properties. Patients in number of 61 persons have been divided on request of demonstrative medicine into 2 groups (33 people - investigated and 28 - control). The dynamic complex of researches to and in the course of treatment is spent. Obshcheklinichesky researches: the general analysis of blood, the general analysis of urine, functional tests of a liver (bilirubin, aminotransferase, thymol test, β - липопропротеиды); the analysis sputum on presence mycobacteria a tuberculosis (МБТ) and definition of sensitivity МБТ to antitubercular preparations; special biochemical researches: the general proteolytic activity of blood, protease inhibitors, lysozyme, ellastaza.

Immunologicheskyy researches: Antibodies of a class and, level of CD3 + lymphocytes. The obtained data testifies to high enough percent negativistic sputum, earlier terms of healing destructions, insignificant quantity of collateral reactions, considerable improvement of the studied indicators with small residual changes in lungs, small percent of development resistant МБТ strains.

ВЛИЯНИЕ ГОРМОНОВ ТИРОИДНОЙ ЛИНИИ НА АКТИВНОСТЬ РЕПАРАТИВНЫХ ПРОЦЕССОВ В БРОНХИАЛЬНОМ ЭПИТЕЛИИ У БОЛЬНЫХ ХОЗЛ

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Гнойно-некротические заболевания нижних дыхательных путей продолжают оставаться актуальной проблемой современной пульмонологии