

The effectiveness of surgical laser in restoring functions of the nasal cavity was evaluated according to the results of anterior active rhinomanometry which include determination of the total volumetric flow (TVF) and total resistance of the nasal cavity. Total volumetric flow (TVF) of the nasal cavity approach to normal range in patients with synechia of the nasal cavity, chronic vasomotor rhinitis, polyposis of the nasal cavity in one month after surgery. Nasal cavity total resistance significantly decrease in patients with nasal cavity synechia, chronic vasomotor rhinitis, nasal polyposis in one month after surgery.

Conclusion:

1. The use of high-energy laser in the treatment of chronic vasomotor rhinitis, the nasal cavity polyps, synechia and post-traumatic atresia of the nasal vestibule, benign tumors of the nasal cavity allowed to achieve good clinical results.

2. The use of surgical laser allows to carry out a number of surgical interventions in the outpatient department without patients' hospitalization in specialized hospital.

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Antioxidant therapy by Reamberin in complex treatment disintegrative pelvis injuries

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Abstract: The authors propose a method of complex treatment of disintegrative pelvis injuries with using antishock external fixation and antioxidant medicament Reamberin. The use of this method reduces amount of bleeding in the early period. Modular principle of construction of the AEF allows to supplement the front (antishock) module, the rear (after stabilization of vital functions of the patient) to the implementation of the final separated repositioning of front and posterior sections of the pelvis.

To date the part of fractures of the pelvis in patients with multiple injuries ranges from 20% to 52% in the structure of injuries of the human musculoskeletal system. Despite the evident progress that occurred in the combined treatment of traumatic disease in last 20 years the mortality in patients with severe combined and multiple injuries of the pelvis remain high (35% to 70%).

Timing of the final fixation of the pelvis are directly dependent on the efficiency of treatment of patients during the first period of traumatic disease. This fact makes us search for new treatments of critical conditions in trauma surgery.

The derivatives of succinic acid have most pronounced antioxidant and antihypoxanth effect. Reamberin[®] is representative of this group of drugs, the positive effect is observed in treatment of practically all critical conditions and surgical diseases.

The aim of the study was to improve the results of treatment in patients with combined and multiple fractures of the pelvic ring by using Reamberin® in the complex therapy.

Subject and methods. Subjects based on the analysis of treatment 56 patients with combined and multiple disintegrating pelvic ring injury in health facilities of the Amur region from 2009 to 2011 years. 30 patients received standard treatment and 26 patients received supplemental antioxidant therapy - they received 400 ml of a 1.5% Reamberin® solution intravenously once a day for ten days after the injury. All the patients have been injured as a result of road accidents. Determination of pelvis injury type was performed according to the recommended AO/ASIF classification of pelvic injuries. The condition severity of the patients on admission was assessed using the integrative scale ISS.

X-ray diagnostics included the examination using portable X-ray machines in anti-shock room or intensive care unit. In some cases, the CT scan in "polytrauma" mode was used. Antishock stabilization by external fixation device (EFD) in author's design (patented №2159091, № 2234277) was carried out in the first 30 minutes - 2 hours after patient delivery in the hospital.

The results of clinical examination, instrumental and laboratory studies were evaluated prospectively by integrative scales APACHEII and SAPSII. Biochemical studies were to explore the dynamics of changes in the values of lipid peroxidation (LPO) and antioxidant system (AOS), blood plasma of patients of the main group and the comparison group. Biochemical studies have been investigating the dynamics of changes in indicators of lipid peroxidation (LPO) and antioxidant system (AOS) in patient's blood plasma in the main group and in the comparison group.

The dynamics of clinical and laboratory parameters were compared with the dynamics of LPO and AOS, then conclusions were drawn about stability of hemostasis and readiness of the patient for surgery that aimed at recovering of the musculoskeletal system. Accordingly, the duration of preoperative preparation was estimated based on these data. Then followed a planned fixation of the pelvis according to the original author's technology (patented №2306895; № 2457805).

Immediate results of the treatment were assessed by analyzing the number of somatic complications, preoperative, in-patient and rehabilitation periods. Long-term results of treatment were evaluated in 1-2 years after the injury.

Results and discussion. It is established that the inclusion of Reamberin® in the complex therapy is accompanied by an antioxidant effect, statistically significant reduction of conjugated diene, lipid hydroperoxide and malondialdehyde and an increase of ceruloplasmin and vitamin E in the plasma at the end of patient's treatment. The dynamics of clinical and laboratory parameters in patients with complex therapy using Reamberin® reflects a rapid stabilization state by the 4th day of treatment (for 2.4 and 3.9 times scales APACHE II and SAPS II, respectively) in contrast to patients treated with standard therapy (stabilization of the vital signs only at the 10th day of treatment). Using Reamberin® in the complex treatment of patients with severe combined and multiple injuries of the pelvis significantly reduces the length of preoperative, in-patient and rehabilitation periods, as well as helping to reduce the total number of somatic complications.

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Vegetative aspects of bronchial asthma for the children

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By priority factors, forming the health of children and teenagers in modern terms, are the state of functional backlogs and adaptive status, for the estimation of that a large value is had indexes of the state of the vegetative nervous system(VNS). Even the small violations of vegetative status, not always fixed as a concrete diagnosis, render considerable influence on the state of health of child on the whole, flow of concomitant pathology, his exit from stress situations, adjusted to physical and psychological.

Presently changing of phases at the syndrome of vegetative dystonia(SVD) for children is presented as a cascade model. This mechanism is a sequence of the processes sent to maintenance of adaptation ability it is adequate to react on *средовые* influences.

In the debut of development of SVD the adequate strengthening of activity registers sympathetic and parasympathictonia departments of VNS (scray increase of activity of one of them in reply to the increase of activity other), that characterizes by itself the phase of tense adaptation.

At the protracted existence of irritant(state of chronic stress) hormonal mechanisms are connected. Their meaningfulness rises thus, but the role of neuromechanisms relatively diminishes. The in this connection next stage of vegetative disorders is characterized by that at the increase of activity of one of departments of VNS a scray change of other department though is, but insufficient. Similar character of vegetative changes reflects a phase relative

In future, at maintenance of overactivity of one of departments of VNS, instead of changes of other department, there is his opposite orientation(for example, instead of scray increase of activity of other department, she goes down), that at vegetative level reflects the phase of decompensation, or to alternative depression.

First two stages with a scray a sympathictonia is parasympathictonia(STh - PSTh) associated safety(stages of indemnification and relative indemnification) with the clinical phase of vegetative disfunction, and phase of decompensation with the loss of STh - PSTh of co-operation - with the clinical phase of vegetative dystonia.

At changing of one phase of SVD other important role the changes of vegetative reactivity play the. Normal vegetative reactivity that is after replaced by hypersympathictonia registers in the initial period of every phase, and last - Asympathictonia. Asympathictonia reactivity changing hypersympathictonia with her emergency power charges assists conservation of energy and functioning of all system already at other, more economy level.

Asympathictonia is the starting mechanism of not only changing of phases but also by the starting mechanism of connecting of new for every phase hormonal-metabolic reactions. Consequently, increasing hypersympathictonia reactivity on some stage is transformed in the new quality state - asympathictonia reflecting exhaustion(insufficiency) of the vegetative adjusting.

In these terms with the purpose of providing or maintenance of long duration adaptation corresponding endocrine mechanisms that in turn "feed" VNS in order that she already at new quality level could provide urgent adaptation are "connected".