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АКТУАЛЬНІ ПИТАННЯ ТЕОРЕТИЧНОЇ ТА ПРАКТИЧНОЇ МЕДИЦИНИ

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Сотрудники больниц, обслуживающие пациентов без специальной защитной одежды, рассматриваются как контактные, к ним применяются соответствующие меры.

CLINICAL-EPIDEMIOLOGICAL PECULIARITIES OF HERPESVIRAL DISEASE IN SUMY REGION

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Epidemiology situation of herpesvirus infection (HVI) in the Sumy region is relatively favorable, but tends to increase. Recurrent herpes is a serious public health problem because it is associated with various disorders. Herpetic rash break normal social life, lead to neuropsychiatric disorders. About 90% of the population aged 15 years infected with herpes simplex virus and only 10% are observed persistent recurrence of the disease.

The purpose of the study. To investigate the clinical and epidemiological features of HVI in the North-Eastern region of Ukraine.

Materials and methods. Examined in patients on HVI, who were treated at the Sumy Regional Clinical Infectious Diseases Hospital by Z.J. Krasovytskyi in 2008- 2012 pp.

Results. A retrospective analysis of 43 medical records in patients in HSV-1, VZV-infected. The average age was $(45,0 \pm 1,4)$, the predominant females - 26 (60.47%), duration of treatment - $(12,0 \pm 0,33)$ bed-days. In the category of hospitalized prevalent group 51 years and over - 35%.

By type of disease-dominated herpes virus III type- 48.84% people, including the proportion of women occupied 25.58%. The highest frequency of hospitalization for HVI accounted for 2008 in the autumn - 15 (34.88%) patients, in October - 9 (20.8%), low in 2010. Dominated by the urban population 95.35% (41 people), the lion's share belongs chronic (reactivated) form - 35 (81.4%) patients. The structure of HSV-1 primary infection occupied 36.36% (8 patients), and reactivated - 63.63% (14), most of the disease was moderate - 35 (81.4%).

The reason is the primary form of HVI contact with a person suffering from cold sores $(75,0 \pm 8,4)\%$. Precipitating factor for infection is reactivated hypothermia (60.0%), acute respiratory infections and other respiratory diseases (31.4%), neuro-emotional stress (8.6%).

Among the complaints on admission are local main symptoms: redness - 7 (16.28%) patients, rash - 43 (100%), pain in the rash and itching - 43 (100%), fever to subfebrile digits and fever - in 16 (37.2%), 28 (65.12%) patients - lymphadenopathy, increasing the size of the liver - in 26 (60.47%).

Localization local pathological process was mainly in the area of intercostal spaces - 18 (41.7%) patients, 16 (36.10%) - in the region of nasolabial triangle in 8 (19.40%) - over the course of the branches of the trigeminal nerve, in 1 (2.80%) - rash on mucosa oropharynx. In clinical blood test determined leukopenia HSV-1 - $(3,9 \pm 0,2)$ $h109 / l$, VSV - $(3,79 \pm 0,3)$ $h109 / l$, segmented by 38.0% and 37.8% respectively, but increased the number of lymphocytes - 42.4% and 44.3% and monocytes - 11.3% and 11.8%. Among the most common complications, autonomic dysfunction syndrome, asthenic syndrome, entsefalopolineyropatiya.

Used PCR for diagnosis HVI 22 $((51,2 \pm 7,71)\%)$ patients, of which confirmed the presence of the virus in 21 $((95,45 \pm 4,55)\%)$.

Conclusions. A significant number of patients with HVI is the working age population. More common in women, average age was 45 years. Mostly reactivated form of infection caused by herpes simplex virus type III, with the localization process in the area of the intercostal spaces.