RISK FACTORS OF RECURRENT ACUTE OBSTRUCTIVE BRONCHITIS IN CHILDREN

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Broncho-obstructive syndrome (BOS) is the collective term including a symptom-complex of specifically outlined clinical implications of disturbance of bronchial passableness, having in the basis narrowing or an occlusion of respiratory tracts. Broncho-obstructive syndrome is condition, which is accompanied by recurrent attacks of expiratory dyspnea (difficulty to exhale) owing to the spasm of bronchial smooth muscles, edema of bronchi, and increased bronchial secretion.

We have analyzed the case histories of 20 children aged from 3 months to 15 years, who were hospitalized with acute obstructive bronchitis. Among them, 25 % were sick for the first time, 75 % had a history of episodes of bronchial obstruction syndrome.

In anamnesis of children were identified the most important risk factors for recurrent obstructive bronchitis: antenatal burdened history in 70 % of patients; burdened allergic history in 50 % of the cases, which is manifested with food and drug allergies and allergic diseases in the nearest relatives; early artificial feeding 25 % of infants; often ARVI 52 % of children during the first year of life; acute bronchitis in 70 % of the children; anemia in 50 % of the cases; chronic tonsillitis, adenoiditis in 45 % of the patients.

So we can distinguish the following favorable risk factors for recurrent acute obstructive bronchitis in infants:

• Familial susceptibility to bronchopulmonary diseases;

• Prenatal and postnatal unfavorable background (toxicosis of pregnancy, fetal asphyxia, Birth Injuries, etc.)

• Acquired immunodeficiency;

- Chronic infection of upper respiratory tract (adenoiditis, chronic tonsillitis, sinusitis);
- Anemia

Important role also played by social factors: passive smoking, air pollution, unfavorable material living conditions and climate-geographical peculiarities: high humidity, large fluctuations in temperature and atmospheric pressure.

Exploring the favorable factors of recurrent obstructive bronchitis in children allows us to estimate the risk of the disease and provides its timely prevention.

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