

Post-traumatic stress disorder - a new medical and social problem in Ukraine

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Etiological factor of post-traumatic stress disorder (PTSD) of participants of military operations is a combat stress, which becomes the main internal barriers to adapt to civilian life. The problem of social and psychological adaptation of combat veterans today is extremely actual practical, scientific and social problem in Ukraine due to the fact that the country is carried out antiterrorist operation (ATO). According to the Research Center of humanitarian problems of the Armed Forces of Ukraine, 80% of Ukrainian troops deployed in ATU received psychological injury.

Objective: To evaluate the incidence of PTSD in combat veterans.

Materials and methods. During 2014, in the municipal institution "Cherkassy Regional Center of Medical and Social Expertise Ch.OR" conducted a study of 47 people by direct questioning, who sought of state medical, social care and rehabilitation and help connection with the injuries and illnesses that they received in the area ATO. The survey was conducted using Mississippi scale, Combat version [Keane T. M. et al., 1987, 1988].

Results. In 3 of the 47 veterans directed for state medical, social care and rehabilitation as a concomitant medical diagnosis was PTSD. At the same time, none of those who were sent to medical institutions for the survey to identify PTSD does not use a scale that allow statistically determine the main symptoms of the disorder [Mississippi scale, Combat version Keane T. M. et al., 1987, 1988; Experience of Stress Scale, Horowitz M. J. et al, 1979]. The diagnosis of PTSD exhibited on the basis of clinical manifestations. Two veterans have been diagnosed PTSD during questioning by the method of Mississippi scale, Combat version.

Findings. Clinical use of the questionnaire Mississippi scale, Combat version [Keane TM et al.,

1987, 1988] allows to reveal veterans with early signs of PTSD, which is important for the early start of rehabilitation. Infrequent use of such methods in the primary care level indicates the need coverage of this topic in higher medical educational Institution and in the medical literature. A small number of veterans surveyed do not allow more serious conclusions. Research into this problem requires special attention from doctors of Ukraine, especially in the conditions of continuing military operations in the country.

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ICROBIOLOGICAL CHARACTERISTICS OF PNEUMONIA IN IMMUNOCOMPROMISED PATIENTS WITH HEMATOLOGIC MALIGNANCIES

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Keywords: pneumonia, hematologic malignancies, microbiological characteristics, infectious pathogens

In the twenty-first century pneumonia still remains an important medical and social problem. Implementation of standardized protocols for diagnosis and treatment of pneumonia from the standpoint of evidence-based medicine into medical practice allowed to achieve some success. Patients with hematologic malignancies due to adverse drug effects, which lead to defects in humoral and cellular immunity, have a significantly greater chance of developing pneumonia. Almost 50% of patients with hematologic malignancies receiving high-dose polychemotherapy fall ill with pneumonia.

However, the mortality rate is quite high, reaching up to 28%. That is why, nowadays, the research interest in issues of microbiological diagnostics and treatment of pneumonia in patients with impaired immunity and hematological diseases is scientifically grounded, due to the peculiarities of microbiological diagnostics as well as to a high percentage of deaths and a significant increase in the cost of treatment.

The aim of this work was to determine the microbiological characteristics of pneumonia in

patients with hematologic malignancies and impaired immunity. A total of 324 (110 females and 214 males) immunocompromised patients with hematologic malignancies had been evaluated. The age of patients ranged from 32 to 67 years. The diagnosis of hematologic malignancies and pneumonia was proved according to generally accepted clinical and morphological criteria. Bronchoalveolar lavage fluid, obtained by flexible fiberoptic bronchoscopy, had been used for identification of microorganisms. According to the results of microbiological studies in immunocompromised patients with pneumonia and hematologic malignancies, the microbiological features of lower respiratory tract infections, depending on the time and place of occurrence had been defined. Approaches to the definition of pneumonia as "communityacquired" and "nosocomial", taking into account the results of microbiological tests, are relevant when choosing antibiotics for the initial treatment of pneumonia in patients with hematologic diseases. Main microbiological characteristics were – bacterial-bacterial and bacterial-fungal mixed infections. Association of bacterial pathogens had been identified in 31,3% and 43,4% of case studies. Association of bacteria with fungal flora had been established in 28,1% and 42,4% of patients. Gram-negative nonfermentative bacteria had been playing an important role as an etiologic agent of pneumonia in immunocompromised patients with hematologic malignancies, regardless of the time and place of occurrence.

It is important to consider the results of microbiological testing outlined above in choosing the best initial antibacterial scheme in the treatment of pneumonia in patients with hematologic malignancies.

Optimization of antibiotic treatment of pneumonia in patients with hematologic malignancies and impaired immunity according to the results of the microbiological tests is an urgent problem and requires further research.