

**Государственное образовательное учреждение
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**ЦЕНТРАЛЬНО-ЧЕРНОЗЕМНЫЙ НАУЧНЫЙ ЦЕНТР РАМН
РОССИЙСКАЯ АКАДЕМИЯ ЕСТЕСТВЕННЫХ НАУК**



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**МОЛОДЁЖНАЯ НАУКА
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Taking part in this role play allows the students to see their future professional activity with a patient's eyes, to understand a patient's problems better, to think over the methods of communication with 'problem' patients. The role play is aimed to the formation of the skills of empathy, and these skills are important for the future professional activity.

Usage of the active methods allows the future dentists not only to master language skills, but also to get an idea of ethic aspects of the professional activity. A certain linguistic, cultural and professional status necessary for a person's self-realization in conditions of professional education and activity is formed.

CLINICAL AND EPIDEMIOLOGICAL FEATURES OF HIV/AIDS IN TERMS OF NORTH-EASTERN REGION OF UKRAINE

Piddubna A.I.

Sumy State University, Sumy, Ukraine

The Department of Infectious Diseases and Epidemiology

Global HIV/AIDS is one of the biggest problems facing our generation. The epidemic of HIV infection in Ukraine keeps having threatening proportions. Today the pace of its development is one of the leading countries of Eastern Europe.

The purposes of our research were: to learn the dynamics of HIV infection dissemination among the population of Sumy region, to analyze sexual and age structure of people with antibodies to HIV 1/2, to study the course and clinical picture of HIV infection in patients who were treated at Sumy Regional Clinical Infectious Hospital named after Z.Y. Krasovytskyi.

Our research lasted during 2001-2010. Within this period intravenous drug users (IDUs), persons with sexually transmitted diseases, persons with plural sexual contacts, prisoners, blood donors, persons examined by clinical indications, pregnant women and their children were examined.

After the analysis of the obtained data, we may suggest that highest rate of HIV-infection in terms of North-Eastern region of Ukraine is relatively stable, but the epidemic process in the region continues to spread through the cumulative number of HIV-infected (registered annually between 104 to 148 new cases of HIV-infection). Despite the growing importance of sexual and vertical transmission of the organism, as evidenced by the recorded strong trend, there is increase in the number of pregnant women with antibodies to HIV 1/2, and a corresponding increase in the number of children born to them. Despite the growing share of sexual HIV transmission, IDUs remain the main driving force behind the spread of infection and constitute 39,63 % of all seropositive individuals. Among the HIV-infected citizens outweigh individual reproductive and working age (an age range from 18 to 40 years accounted for 90,7 % of IFA-positive individuals). Males accounted for more than 2/3 of all HIV-infected in Sumy region, which indicates that, it's in men between the age of 18-29 years old, and injecting drug users as the most likely diagnosis to HIV infected. Increasing proportion of HIV-infected, revealed by the presence of clinical signs of disease. Among the clinical indications for testing for HIV infection accounted for the largest share of tuberculosis (52,5 %) and hepatitis B and C (13,9 %).

The number of HIV infected people who need medical care among residents of the area was increasing every year. Nearly half of patients were diagnosed III-IV clinical stage

of HIV infection. Pathology of the nervous system was the main cause of seeking medical help. A high percentage of liver, lungs and skin affection also was found in patients with HIV/AIDS. The combination of a significant frequency of HIV infection with parenteral hepatitis and opium addiction was recorded.

CLINICAL AND LABORATORY FEATURES OF INFECTIOUS MONONUCLEOSIS IN CHILDREN

Rashika Samaranayake, Zaytseva L.U.

Kursk State Medical University

Pediatrics department

Epstein-Barr virus, frequently referred to as EBV, is a member of the herpesvirus family and one of the most common human viruses. The virus occurs worldwide, and most people become infected with EBV sometime during their lives. In the United States, as many as 95% of adults between 35 and 40 years of age have been infected. Infants become susceptible to EBV as soon as maternal antibody protection (present at birth) disappears. Many children become infected with EBV, and these infections usually cause no symptoms or are indistinguishable from the other mild, brief illnesses of childhood. In the United States and in other developed countries, many persons are not infected with EBV in their childhood years. When infection with EBV occurs during adolescence or young adulthood, it causes infectious mononucleosis 35% to 50% of the time.

Under our supervision there were 57 children diagnosed with infectious mononucleosis hospitalized in Kursk infectious hospital. Two of them are younger than 1 year, from 1 to 3 years - 20 patients, 4 – 7 years 10 patients, 7 – 15 years – 10 patients, 15 patients elder than 15 years. Laboratory investigations included complete blood count, cultural investigation of nasopharyngeal mucus, ultrasound examination of liver, spleen and lymphatic nodes, ELISA-test to Epstein-Barr virus, cytomegalovirus and *Toxoplasma gondii*.

Most who suffered from IMN were boys. An absolutely majority of 100% was registered among children less than 1 year. With age, the proportion of boys and girls reduced, accounting for 65% of patients from 1 to 3 years, and gradually leveled up to 50 % for 7 year group. In adolescence, the proportion of cases of IMN diseased boys is reduced to 40%. All sick children revealed lymphadenopathy. The degree of enlargement of lymph nodes depends on severity of IMN and the child's age. Lymphadenopathy persists for a long time, about 2 – 3 weeks. The syndrome of acute tonsillitis was observed in 100% of sick children in all age groups – a bright or moderate hyperemia of the pharynx. The average duration of the syndrome in children under 1 year $7,4 \pm 0,6$ days, and in children older 1 year $5,2 + 0,5$ days. Hepatosplenomegaly syndrome is one of persistent symptoms of the disease. An enlarged liver and spleen was noted in 90% of children aged 4 to 15 years, 80% patients from 1 to 3 years and only half of children under 1 year. In adolescence hepatosplenomegaly syndrome was observed only in 40% of cases. Hepatomegaly occurred in 40 % of patients before splenomegaly. The size of the liver increases at the beginning of the disease, reaching maximum around the 10 -14 day of the disease and gradually returning to normal within 3 months. The size of spleen decreases more rapidly in 2 – 4 weeks.