

МІНІСТЕРСТВО ОСВІТИ ТА НАУКИ УКРАЇНИ
СУМСЬКИЙ ДЕРЖАВНИЙ УНІВЕРСИТЕТ
МЕДИЧНИЙ ІНСТИТУТ



АКТУАЛЬНІ ПИТАННЯ
ТЕОРЕТИЧНОЇ ТА КЛІНІЧНОЇ МЕДИЦИНИ
Topical Issues of Theoretical and Clinical Medicine

ЗБІРНИК ТЕЗ ДОПОВІДЕЙ
V Міжнародної науково-практичної конференції студентів та молодих вчених
(м. Суми, 20-21 квітня 2017 року)

Суми
Сумський державний університет
2017

during the day was noted in 117 (76%) patients, and medium hard or hard condition persisted for more than 2 days occurred in 36 (24%) children.

Conclusion. The frequency of acute poisoning affects age: often suffer in preschool and high school age, belonging to a male, autumn seasons. During the period from 2013 to 2016 years revealed a tendency to increase the number of acute poisoning. More common poisoning medicines. Dynamics of the patients in the vast majority was improving during the day, which depended on timely hospitalization. Feature of acute poisoning in young children is the difficulty of diagnosis and some latent poisoning. Lack informative paraclinical diagnostic methods reduces the effectiveness of early detection of etiological factors and appropriate and timely treatment.

CRYSTALLOGRAPHIC INVESTIGATION OF URINE IN MATURE NEWBORNS WITH RENAL DISTURBANCE DUE TO ASPHYXIA

Daniel Okoyo, Amach Oto Obong- 5th year students

Scientific supervisor - Petrashenko V.O.

Sumy State University, Department of Pediatrics

Introduction. The most common pathology in neonatal period is transient renal, which under adverse conditions can lead to the development of acute renal failure. Diagnosis of renal neonatal asphyxia is difficult because of the lack of specific clinical symptoms and lack of informativeness of traditional survey methods.

The purpose of the study. Research purpose to increase the efficiency of diagnosis of renal injury in neonates with asphyxia by identifying of structural markers according to research facies of urine in mature newborns.

Materials and methods: The study involved 150 full-term infants with signs of kidney damage due to asphyxia: 75 babies who have suffered from severe asphyxia, and 75 children with moderate asphyxia. Comparison groups consisted of 20 full-term infants.

Material for the study was the morning portion of urine, which was collected at 8-10 on 1-2 day of life.

Results: In neonates with renal impairment due to moderate asphyxia we revealed a clear division of facies into zones, central, transitional and peripheral. The width of the peripheral zone was $8,2 \pm 1,15\%$ of the radius of the nodules, the width of the transition zone was $11,1 \pm 0,95\%$. The central zone was close-grained.

Facies contained small, medium-sized and large rounded, elongated or irregular shape crystals. Most inclusions located in the central zone of drop, transition and peripheral zones had only a few inclusions. Their number at 1-2 days of life ranged from 40 to 70 per facies ($52,7 \pm 3,32$), and their total area was $3,1 \pm 0,47\%$.

In infants who had signs of renal impairment on the background of severe asphyxia facies can be divided into central and peripheral zones only conditionally. The width of the peripheral zone was $5,2 \pm 0,57\%$ of the radius of the nodules. The structure of the central zone in most cases had close-grained character, but we met plot gap of facies. The number of inclusions in lesions of the kidneys due to severe asphyxia at 1-2 days of life ranged from 50 to 150 per facies ($102,17 \pm 8,2$), and their total area was $6,2 \pm 0,54\%$.

Conclusions. Thus, the morphological picture of facies depend on the severity of asphyxia. Analysis of dried drops of urine in neonates with renal impairment on the background of asphyxia can be used as one of the criteria for assessing kidney function and have prognostic significance.