

MINISTRY OF EDUCATION AND SCIENCE OF UKRAINE
SUMY STATE UNIVERSITY
MEDICAL INSTITUTE



«BIOMEDICAL PERSPECTIVES II»

ABSTRACT BOOK

International Scientific Conference
of Students, Postgraduates and Young Scientists

(Sumy, October 20-22, 2020)

Sumy
Sumy State University
2020

Biomedical Perspectives II: Abstract book of International Scientific Conference of Students, Postgraduates and Young Scientists, Sumy, October 20-22, 2020.
– Sumy : Sumy State University, 2020 – 123 p.

GENERAL INFORMATION

Conference Dates: October 20-22, 2020.

Location: Sumy, Ukraine.

Place: Sumy State University

Language: English.

Conference Website: <http://sc-conf.med.sumdu.edu.ua/>

Contact email: conference.med.ssu@gmail.com

Contact phone: +380507276193

Organizing Committee: Prof. Maksym Pogorielov;
PhD Vladyslav Sikora;
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ANALYSIS OF THE TUBERCULOSIS MORBIDITY RATE AMONG MEDICAL WORKERS IN SUMY REGION

Denysenko A.

Research advisor: Ph.D., assistant Oleshchenko H.P.

*Department of surgery, traumatology, orthopedics and phthisiology,
Medical Institute, Sumy State University, Ukraine.*

Introduction. Despite widespread introduction of infection control measures in medical institutions, morbidity rate of this disease among health workers, especially in tuberculosis (TB) facilities, is a matter of concern and remains an urgent problem in different aspects.

Aim. To study the tendency of TB morbidity rate among medical workers of Sumy region in the dynamics over last decade.

Materials and methods. The indicators of TB morbidity among medical workers of Sumy region for 2010-2019 (according to e-TB Manager and Analytical and Statistical Reference Books «Tuberculosis in Ukraine») were processed.

Results. During 2010-2019, 87 medical workers fell ill with TB in Sumy region (during 2010 year – 11, 2011 – 16, 2012 – 7, 2013 – 8, 2014 – 6, 2015 – 6, 2016 – 6, 2017 – 11, 2018 – 11, 2019 – 5). Among them, medical workers of anti-TB facilities (ATF) – 15 (2010 – 5, 2011 – 1, 2012 – 3, 2013 – 0, 2014 – 1, 2015 – 2, 2016 – 1, 2017 – 1, 2018 – 1, 2019 – 0). While the number of sick employees from general health network (GHN) were 72 (2010 – 6, 2011 – 15, 2012 – 4, 2013 – 8, 2014 – 5, 2015 – 4, 2016 – 5, 2017 – 10, 2018 – 10, 2019 – 5). Accordingly, the share of medical workers from ATF 17,2%, and employees from GHN – 82,8%.

Among detected cases, number of people with first time diagnosed TB is 82 (ATF employees – 12 (14,6%), GHN employees – 70 (85,4%)). The number of patients with retreatment cases of TB – 5 (ATF employees – 2 (40,0%), GHN employees – 3 (60,0%)). The total average morbidity rate during 2010-2019 equals 4,3 per 10 thousand health workers. Thus morbidity of workers of ATF makes 74,3, and workers of GHN – 0,75. Accordingly, morbidity among medical workers of ATF is 100 times higher than in GHN workers.

Conclusions. Despite the fact that in absolute numbers morbidity in ATF workers is only 17,2% of all ill health workers, in relative terms morbidity in ATF workers exceeds the incidence of GHN workers 100 times. Professional contact with TB patients should be carried out in strict compliance with requirements of infection control, which is especially relevant in context of reforming the TB service, when most of the duties to diagnose and treat TB patients are transferred to general practitioners.

E-mail for correspondence: andenisenko98@gmail.com