

**МІНІСТЕРСТВО ОСВІТИ І НАУКИ УКРАЇНИ
СУМСЬКИЙ ДЕРЖАВНИЙ УНІВЕРСИТЕТ
КАФЕДРА ІНОЗЕМНИХ МОВ
ЛІНГВІСТИЧНИЙ НАВЧАЛЬНО-МЕТОДИЧНИЙ ЦЕНТР**

**МАТЕРІАЛИ
VIII МІЖВУЗІВСЬКОЇ НАУКОВО-ПРАКТИЧНОЇ
КОНФЕРЕНЦІЇ
ЛІНГВІСТИЧНОГО НАВЧАЛЬНО-МЕТОДИЧНОГО ЦЕНТРУ
КАФЕДРИ ІНОЗЕМНИХ МОВ**

“TO LIVE IN A SAFER WORLD”

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CONCENTRATION OF
LEUKOCYTES SUBPOPULATION IN BLOOD SERUM OF
CHILDREN SUFFERING FROM ACUTE OBSTRUCTIVE
BRONCHITIS AND THYMOMEGALIA

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In recent times children suffering from acute obstructive bronchitis (AOB) need increased attention of Ukrainian doctors due to the fact that almost 30% of all patients having respiratory diseases suffer from this pathology. The immune system together with one of its main organs - thymus is one of the main components involved in the pathogenesis of bronchopulmonary diseases because infectious agent acts directly through it.

Aim of the study was to investigate the level of CD3+ and CD21+ in serum of young children having acute obstructive bronchitis, depending on the presence of concomitant thymomegalia (TM).

101 children having AOB were under the supervision. They were divided into 2 groups: group I - patients suffering from AOB having no TM, II group - patients having both TM and AOB. The control group consisted of 26 virtually healthy children.

In the acute stage of the disease children of group I had concentration of CD3+ 2 times lower comparing with the children in the control group ($(47,8 \pm 1,03) \% (p < 0,05)$), while the level of CD21+ increased to $(24,5 \pm 0,61) \% (p < 0,001)$. CD3+ content in the second group of children at the beginning of the disease decreased to $(14,12 \pm 0,24) \% (p < 0,001)$. Alongside CD21+ in serum increased more than 2 times ($27,52 \pm 1,61 \% , p < 0,01$).

Patients suffering both from AOB and TM had the content of CD21+ significantly higher than the patients having AOB without TM ($p < 0,001$). Meanwhile, the concentration of CD3+ in the second group of children was significantly lower than in group I patients ($p < 0,001$).

Concomitant TM probably leads to harder imbalance of subpopulation of leukocytes and aggravates AOB in children on the early stages of the disease.