SUMY STATE UNIVERSITY MEDICAL INSTITUTE





TOPICAL ISSUES OF THEORETICAL AND CLINICAL MEDICINE

ABSTRACT BOOK

International Scientific and Practical Conference of Students, Postgraduates and Young Scientists

(Sumy, October 17-19, 2018)

Sumy Sumy State University 2018

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



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STRUCTURE OF OPPORTUNISTIC INFECTIONS IN PATIENTS WITH HIV-INFECTION

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Introduction: HIV-infection in recent years has become one of the most important problems of our time. This is due to the fact that the disease is constantly progressing among the population and affects more and more people. The main cause of mortality among HIV-infected are opportunistic infections. Concomitant pathology aggravates the course of the disease.

Aim: to define the structure of HIV-associated infections

Materials and methods: Were research the medical records of 47 patients, who were treated at the Sumy Regional Clinical Infectious Diseases Hospital named after Z.J. Krasovitskiy in 2016-2017 years. The average age was $(37,38 \pm 7,53)$, the predominant males (72,34%).

Results: Patients with the first clinical stage were -5 (10,63 %), with the second stage -0, with the third stage -7 (14,89 %), and with the fourth stage -35 (74,46 %). Oropharyngeal candidiasis was found in patients -53,19 % (p<0.01), that more often compared with other opportunistic infections, and comparatively less frequently: brain toxoplasmosis -21,27 %, pulmonary tuberculosis -19,14 %, extrapulmonary tuberculosis of the nervous system -8,51 %, pneumocyst pneumonia -8,51 %, herpetic encephalitis -4,25 %, chronic generalized cytomegalovirus infection -4,25 %, papillomatosis of the mouth of the pharynx -4,25 % extrapulmonary tuberculosis disinmited-2,12 %, encephalitis caused by the virus Epstein-Barr -2,12 %. It was found complications: anemia -23,40 %, leukopenia -2,12 %. In patients with HIV, chronic viral hepatitis C and metabolic cardiomyopathy were found more frequently (57,44 %; 55,31 %, respectively, p<0.01) compared with other concomitant pathologies: an anticopilia of the retinitis of both eyes -23,53 %, chronic viral hepatitis B -12,76 %, chronic pancreatitis -4,25 %, chronic viral hepatitis D -2.12 %, intestinal dysbiosis -2.12 %.

Conclusions: Diagnosis of the first and second stages of HIV-infection is low. Opportunistic infections and concomitant illnesses aggravate the course of HIV-infection. The most common opportunistic infection is oropharyngeal candidiasis. Chronic viral hepatitis C and metabolic cardiomyopathy are predominate in the structure of concomitant pathology.

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