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Abstracts were published in the alphabetical order of authors' last names.

MICROBIOTIC LARGE INTESTINE DISORDERS IN INFANTS WITH COMMUNITY-ACQUIRED PNEUMONIA

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Introduction: In the last decade, changes in the gut microbiota, with various diseases of the respiratory system, have received much attention. According to scientific studies, the pathology of respiratory organs in children is often reflected in the balance of intestinal microflora. In addition, the use of antibacterial therapy in the treatment of community-acquired pneumonia (CA), even at therapeutic doses will lead to increased disturbances by microbiocenosis.

The aim: To study the state of quantitative composition of large intestine microflora in infants with CA.

Materials and methods: We have studied the microflora stability index (ISM), which is the number of the ratio of the total amount of bifid and lactobacilli to the number of total Escherichia coli, and normally exceeds 2.0 units. In parallel, the index of dysbiosis (ID), which consists of the ratio between autochthonous and allochthonous microorganisms of intestinal contents and in the norm is $-1,33 \pm 0,14$ units, was calculated.

Results: The study involved 42 infants within the age range from 1 month to 36 months who were treated in the infectious disease ward №1 of the Municipal Non-Profit Enterprise "Children's Clinical Hospital of Saint Zinaida" Sumy City Council with a diagnosis of community-acquired pneumonia. The studies were performed on the first day of admission to the hospital and after the cancellation of antibacterial treatment.

The survey was divided into two groups, based on the age of the infants. The first group - 20 infants from 1 to 12 months, the second group - 22 infants from 12 to 36 months. Studies have shown that infants of the first group of ISM before treatment averaged 4.69 ± 1.88 units, in the dynamics of treatment, this indicator almost did not change. At the same time, in the second group of patients the ISM was sharply reduced by 0.61 ± 0.54 before the start of antibacterial therapy and 0.05 ± 0.05 units - after it.

The results of the ISM count indicate dysbiotic disorders of the colon microbiome in infants of the second group, both before and after treatment with antibiotics. In infants under 12 months of age, the ISM index is higher than 2.0 units, both at the beginning of the disease and after the etiotropic treatment. It can be assumed that this indicator in infants of the first group was dependent on the type of feeding. Breastfeeding infants are known to be dominated by bifidobacteria and lactobacilli among the gut microbiota, and the growth of others is inhibited.

On the other hand, all subjects tested for treatment of CA pneumonia amounted to 1.19 ± 0.25 units, indicating the development of dysbiotic changes of the large intestine in infants of all groups on the background of the disease. The CA indicator continued to decline after the treatment.

Conclusions: Thus, both during the admission of infants to the hospital and after conducting etiotropic therapy, microbiological disturbances of the biocenosis of the colon occur, especially in infants older than 12 months. Therefore, given these studies, it is advisable to recommend to include drugs that normalize intestinal microbiocenosis in the scheme of treatment of the disease.

KEY WORDS: dysbiosis, intestinal microflora, the index of dysbiosis, the microflora stability index

ВПЛИВ РОДИНИ НА ФОРМУВАННЯ СВІДОМОГО СТАВЛЕННЯ ПІДЛІТКІВ ДО ВЛАСНОГО ЗДОРОВ'Я

THE FAMILY'S INFLUENCE ON THE FORMATION OF THE ADOLESCENT'S CONSCIOUS ATTITUDE TO OWN HEALTH

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Вступ: Самооцінка - це ставлення людини до себе. Вона формується на основі власного досвіду - успіхів і невдач, а також залежить від ставлення інших людей. Здатність реально оцінювати себе і позитивно ставитися до себе та своїх життєвих перспектив дуже важлива для здоров'я людини, а особливо підлітків, оскільки ця фаза зростання відноситься до критичних періодів розвитку. У більшості випадків підлітки не знають, що вони мають можливість самі, з власної волі, змінити своє самопочуття, емоції, поведінку, мислення, формувати свою особистість та впливати на стан свого здоров'я. Дотепер процес формування здорового способу життя підростаючого покоління ідентифікувався переважно лише з фізичним вихованням, що суттєво спотворювало наявну ситуацію. Важливим фактором формування, збереження і зміцнення здоров'я, ефективної соціальної адаптації підлітків в оточуючому середовищі є родина.

Мета: Гігієнічна оцінка впливу родини на формування свідомого ставлення підлітків до власного здоров'я.

Матеріали і методи: Було проведено анонімне анкетування 1025 дітей (492 хлопців та 506 дівчат) 15-17 років, учнів дев'ятих класів ЗНЗ України. Данні зібрані за допомогою опитувальника «Методика оцінки впливу близького соціального оточення на суб'єктивне сприйняття власного здоров'я підлітками». Соціально-гігієнічний