

3. The diagnosed immune alterations define the advisability of using immunotropic preparations in anesthetic management of the operations concerning children's COU.

The article is admitted to the International Scientific Conference « Advanced educational technologies and principles of academic process organization», Rome-Florenziya-Venice, 2007 March 10-17; came to the editorial office on 07.02.07

CLINICAL VALUE OF THE DEFINITION OF SPECTRUM UROPATHOLOGICAL AGENTS IN CHILDREN WITH OBSTRUCTIVE PYELONEPHRITIS AT THE PRESENT STAGE

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In the context of children's urinoexcretory tract obstructive disease number growth tendency and a large percentage of complications of these diseases with secondary infectious processes, we undertook an attempt to evaluate the features of pyelonephritis microflora in children with congenital obstructive uropathy (COU) in its dynamics and to clear up the reasons of various potency of inflammatory processes in different patients. Patient histories of 5-14 year-old children with COU, who had been treated in the surgical department of Kirov Regional Clinical Children's Hospital from 1997 to 2002, and the data for urine culture obtained during the children's examination in three months after discharge from the hospital were subject to the retrospective analysis. Obstructive pyelonephritis complicated COU in 90,4% of the cases, 52 patients being examined.

At the admission to the hospital *St.aureus* (42,3%) were cultured more often, more rarely – in decreasing order- epidermal staphylococcus, collibacillus, *Klebsiella*, saprophytic staphylococcus, streptococcus, enterobacterium, seracia. The culture was negative in 13,7% of the

patients. In the dynamics the microflora had been changing and, at the discharge of the child from the hospital, *E.coli* (23%) were detected more often, more rarely – epidermal staphylococcus, blue pus bacillus, mycology, aurococcus, *Klebsiella*, *Proteus*, enterobacterium. The culture was negative in 34% of the patients. In three months *St.epidermidis*, *E.coli* (no 13,5%) lead, yeast-like fungi were detected in 23,5% of the cases. Blue pus bacillus, different staphylococcal associations, *Proteus*, *Seracia* and aurococcus were cultured more rarely. The urine culture had no results in 21, 3 % of the cases.

For the quantitative concept of intoxication syndrome as one of the inflammatory process potency component we calculated the leucocytic index of intoxication (LII). In the patient general group at the admission to the hospital it was high and in average it was equal to 3,42. In the dynamics normalization of the index was marked. Significant differences of the LII meanings were detected in "aseptic" diseases (0,98) and COU with pyelonephritis (3,6). More than that, we paid attention to the fact that the LII at the admission was much more higher than overall average ($\approx 6,93$) in a particular group of patients. The disease forms of these children were very different, and all of them were complicated with pyelonephritis. Having compared the data we found out that *E.coli*. was cultured from the urine in 75% of the cases during the first term of the research in a group of patients with the most active pyelonephritis.

By virtue of our research results we can make the following conclusions:

1. The status severity of sick children with COU is primarily conditioned by the activity of secondary infectious process, and the laws of representation in microbiological spectrum have stage character.
2. The maximal evidence of the intoxication syndrome is typical of coli-mediated secondary chronic obstructive pyelonephritis.

3. As fungi and Proteus had never been cultured at the children's admission to the hospital, their identification should be evaluated as a complication of antibacterial therapy at the discharge from the hospital and in long-term period.

The article is admitted to the International Scientific Conference « Current problems of science and education», Cuba, (Varadero), 2007 March 19-30; came to the editorial office on 16.02.07

**DYNAMICS OF
ELECTROENCEPHALOGRAPHIC
INDICES OF THE COGNITIVE
PATHOLOGY AT SCHIZOPHRENICS
WITH PAROXYSMAL AND CONTINUOUS
CLINIC COURSE UNDER THE
INFLUENCE OF
PHYCHOPHARMACOTHERAPY.**

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Schizophrenia is one of the most important problems both for modern clinical psychiatry, and for the science dealing with human brain in whole. According to specialists' estimate, approximately 1% of all population in industrially developed countries are subjected to this disease (Sedok B., Caplan G.I., 2002).

Schizophrenia is heterogeneous mental disorder with wide range of disturbances in cognitive processes. The investigation of bioelectrical activity of brain could ease the objectification of these difficult and varied disturbances and prediction for a therapeutic response.

The aim of this work was the investigation of cerebral rhythms (theta, alpha and beta) according to the indices of size, topography, asymmetry and synchronization in every frequency range in order to identify the relationship between rhythms and their synchronization in space-hold and in a cognitive load. And also the development of differentiated statements for psycho pharmacotherapy of schizophrenics adjusted for indices of clinical estimate of their states and electroencephalographic parameters' dynamics.

Materials and methods: EEG-investigation of 148 paranoid schizophrenia patients, receiving antipsychotic therapy in the condition of in-patient facility was carried out. Psychotic manifestations were qualified in 75 patients (1 group) within the paroxysmal schizophrenia on MCB-10, 73 patients (2 group) had ceaseless character of clinic course.

71 patients (main group), of which 38 (53,5%) were women and 33 (46,5%) men, had got atypical neuroleptics (risperidone, quetiapine, olanzapine), and 77 (control group)- 37 (48,05%) were women and 40 (51,95%) men got haloperidol. All preparations were prescribed in the form of monotherapy in an adequate therapeutics dosages, in some cases clozapin was connected in order to rapid relief of marked disomny disturbances. 38 mentally healthy probationers composed the control group. All probationers were right handed. EEG mapping was carried out in case of getting to the in-patient facility in 7 days after repealing preparations with the help of electroencephalography «MICHAR - EEG - 2000». The results of investigations of spectrum capacity on ranges of theta, alpha and beta, averaged according to groups of probationers for recording in a background and in carrying out of cognitive test (calculation according to Crepelin), and also analysis of coefficient index of interhemispheric asymmetry were used in the work (KA).

Results of carried out investigations and conclusions: All EEG rhythms are symmetric and synchronic both on phase, and on frequency in a normal position against the background. In schizophrenia expressed asymmetry of cerebral rhythms and decreasing of synchronization level in comparison with norm are marked. In patients with paroxysmal clinic course, the asymmetry and lack of coincidence of EEG vibrations by phase and frequency are the most expressed, that testifies about «break» of interactions of grey matters, functional disorganization of cerebral processes and the possibility of psychopharmacological correction.

There is a complex picture of interhemispheric asymmetry in the patients with chronic clinical course, expressed for each EEG rhythm in different way. And also sharp reduction of capacity of all EEG rhythms corresponds to steady pathological condition and