SCREENING FOR TOXOCARIASIS OF PATIENTS WITH ALLERGIC DISEASES

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Toxocariasis is a disease of humans caused by larvae (immature worms) of either the dog roundworm (Toxocara canis) or the cat roundworm (Toxocara cati). Toxocariasis is often called visceral larva migrans. This zoonotic, helminthic infection is a major cause of blindness and may provoke rheumatic, neurologic or asthmatic symptoms. Humans normally become infected by ingestion of embryonated eggs from contaminated sources (soil, fresh or unwashed vegetables).

Diagnosis of toxocariasis is difficult in view of polymorphism and uncertainty of clinical manifestations. Clinical manifestations of toxocariasis do not have their own specific features, complicating the diagnosis of the disease. Patients often focus doctor's attention on previously established diagnosis: bronchial asthma, atopic dermatitis and other. Eosinophilia is often severe and sometimes represents the only sign of infection, except in ocular and neurological forms. Therefore, a key role in diagnosis belongs to laboratory methods of diagnostics.

The object. Optimization of diagnosis of toxocariasis among high risk groups.

Materials and methods. 30 patients aged 21 to 55 years (men - 17, women - 13) were under our supervision. 19 of them were in the in-patient Department of the specialized allergological center, 11 patients were treated in outpatient clinics allergological center and Republic infectious diseases clinic. We have examined for toxocariasis 30 patients with chronic allergic diseases (bronchial asthma, urticaria, atopic dermatitis), and patients with high level of eosinophils of unknown etiology.

During the study all the patients were carefully analyzed for the history of the illness, accent has been made on epidemiological anamnesis. Collecting epidemiological history we asked about the presence of an animal in the house, especially the dogs and the presence of pietism (geophagia). Clinical and laboratory examination were carried out.

Serological testing for toxocariasis was performed at the laboratory of immunology of parasites, by using ELISA test system "Toxocarastrip".

Results. Positive results were received in 14 patients from 30 examined patients. The frequency of major clinical manifestations of toxocariasis was presented as follows: manifestations of allergic skin rash - 7 (50,0%), astheno-vegetative syndrome - in 11 (78,5%), intoxication syndrome - in 10 (71.4%), pulmonary syndrome in 5 (35.7%), enlargement of lymph nodes - 4 (28,5%), alopecia in 1 (7,1%). In peripheral blood eosinophilia were found in 13 (92,8%) patients.

Conclusion. Based on epidemiological analysis it was established that the key risk factors for infection with T. canis are existence of geophagia and/or contact with a dog (79%). The range of clinical variants of toxocariasis course varies to a great extent. These data coincide with the literature data. The most frequently toxocariasis was diagnosed in patients with allergic skin rash (50,0%), astheno-vegetative syndrome (78,5%), intoxication syndrome (71,4%) and high titers of antibodies to T. canis.

THE CORELATIONS BETWEEN IMMUNOGRAM PARAMETERS IN THE PATIENTS WITH CHRONIC VIRAL HEPATITIS C

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The wide prevalence of hepatitis C virus among the population, prediction to chronic process, frequent development of the liver cirrhosis and hepatocellular carcinoma as well as variability of immune responses make the problem of chronic hepatitis C one of the most important aspects in the area not only in the hepatology but also in the whole field of the internal medicine. The prolonged existence of the HCV in the human body is explained by its ability to survive under the conditions of strength and various immune

responses. Without providing of the complete virus elimination the immune system has significant effect on the development of HCV-infection.

The purpose of our investigation was to study correlations between immunogram parameters in the patients with chronic viral hepatitis C.

There were studied 35 patients with chronic viral hepatitis C (CVHC), mean age was 39,33±5,23 years. Out of 35 in 9 patients viral genome was PCR (-), in 26 patients – PCR(+). Immunological investigation was performed with use of monoclonal