

tumor growth. Study of the dependence of stomach ulcers and malignancy development on strains with high pathogenicity genes, such as *cagA* and *vacA* associated with carcinogenesis, showed the same shifts of CD cells number in the local immune homeostasis of mucous membrane in the pyloric, fundal and cardial section of the stomach. In our opinion, this may indicate that the key role in the pathogenesis of gastric ulcers and carcinogenesis is played not by the pathogenic agents, but the state of local immune homeostasis of the gastric mucosa, providing barrier properties of the surface epithelium. Preceding carcinogenesis atrophy of the gastric mucosa indicates the common mechanisms of carcinogenesis in tissues of various organs, and does not endorse the view on the absence of apoptosis in tissue malignancy. In our studies, total apoptosis and atrophy precede carcinogenesis.

The work was submitted to International Scientific Conference «Present-day problems of science and education», Russia (Moscow), February, 25–27, 2014, came to the editorial office 14.02.2014.

FEATURES OF ATOPIC DERMATITIS IN CHILDREN WITH HERPES INFECTION

Sirazitdinova V.F.

*Tashkent Pediatric Medical Institute,
Tashkent, e-mail: vika_sir@mail.ru*

The purpose of the study: to study the frequency of infection in children with atopic dermatitis herpesvirusnymi infections, a study of the psychological characteristics of status. Material and methods: in the clinic in the department of dermatology TashPMI were examined 35 children with a diagnosis of «atopic dermatitis» in age from 1 to 7 years. The complex studies of sick children were included traditional methods, PCR diagnosis of peripheral blood was determined by dermatological quality of life index, the index of itching. Conclusions: In order to correct pathology therapy were included Cyclopheron, Gipovin. To correct the psychological status was used Adaptol. Results: 19 patients were diagnosed AIT, a 17 – set changes in the psychological status.

Atopic dermatitis – a multifactorial disease in most cases with a hereditary predisposition, having a chronic relapsing course with a certain age evolutive dynamics characterized by itchy eczematous and lichenoid eruptions, as well as abnormalities of cellular immunity in the skin with dysregulation of T-cell immunity strength. In children with AD usually occurs early in life and is characterized by severe severity of clinical manifestations, chronic recurrent nature. The disease often manifests continuous flow (without remission), frequent complications and worsening of the skin process. Known combination with various AD, including infectious diseases [7].

Allergic diseases have a high share in the structure of human disease. Very often, both in children and adults occurs – Atopic dermatitis (AD). In the

world of this disease suffer from 3% to 15% of children from 2 to 10% of adults [8, 10]. In the general structure of dermatoses AD is from 5 to 30% [4, 5, 6, 7], infant morbidity structure – from 20 to 66%. Currently, there is a significant increase in the incidence of atopic dermatitis in children, which is manifested in 90% of children in early childhood, treated by a dermatologist. [8] Numerous recent studies have shown that AD identified in childhood still persist in 45–60% of adult patients. These data suggest that AD is one of the very significant health problems.

Psychological disorders in patients with chronic skin diseases recorded in 30-40% of cases and are relevant subjects for the study, analysis and discussion.

Previously, it was suggested that psychosomatic factors play an important role in dermatological diseases. According J.W. Ironside (1994) – the body vulnerable to psychosomatic illnesses, under the influence of several etiological factors, including genetic predisposition and constitutional. There is a view that emotional factors managed CNS include intrapsychic processes such as self-esteem or identity of the body, which in turn is subject to «conversion» due to emotional arousal associated with intrapsychic problems, social factors determining the state of the body [9].

It is known that mental stress is associated with increased levels of opioid neuropeptides and amplifies certain dermatological conditions which are psychosomatic and immunological component type psoriasis, chronic idiopathic urticaria, allergic dermatitis. According to V.V. Nikolaeva, any chronic illness puts one flowing into the specific conditions of life, which include: the need for adherence, diet, perform various medical recommendations stimulated limiting contact with people, sometimes – the difficulty in performing professional activities, maybe even access to disability. The study of all these conditions may contribute to the understanding of some mechanisms of identity formation, which in turn is necessary for solving the problems of prevention in individual psychologically pathological personality development. With AD, early onset, chronic long-term course of the disease with periodic exacerbations, resistance to therapy, the need for dieting, painful subjective experience itching, constant feelings of discomfort experienced by patients when communicating with others, lead to the development of the specific identities of these patients [6].

Currently, AD is also referred to as psychosomatic illnesses, as well as patients with clinical manifestations of the disease and experiencing psychological problems.

Herpes simplex, especially its relapsing form belongs to a group of dermatological diseases, depending on the psychological stress and is a disease in which dominate psychosomatic disorders as a result of the reaction of the person on recurring throughout the process. Many consider this disease,

especially in combination with other important social problem, since there is a malfunction in the patient's life. Children suffering from atopic dermatitis, usually later in life become selfish and gradually transformed into the hidden, repressed people [4].

Thus, in the pathogenesis of a variety of skin diseases leading position as trigger factors occupy psychosomatic disorders associated with the life of the sick in the family, at school, in the team, during outdoor activities affecting the course and severity of the clinical condition, and in some cases exacerbate clinical dermatosis.

The aim of our study was: to study the frequency of infection herpesvirusami children with atopic dermatitis and features a study of the psychological status of children with atopic dermatitis, infected with herpes. In the department of dermatology clinics TashPMI hospitalized were 35 children with a diagnosis of «atopic dermatitis» in age from 1 to 7 years, among them girls – 21 (60%), boys – 14 (40%). Duration of the disease in almost all cases corresponded to age. Patients had the following forms of AD: erythematous form observed in 11 (32%) patients; erythematous- squamous – in 9 (26%); prurigenoznaya – 7 (20%); erythematous-squamous with lihenifikatsii – in 5 (14%); lichenoid – 3 patients (8%). Seasonality in the course of the disease was observed in 27 (77%) patients, worsening of the disease was more common in cold weather. Among the factors causing exacerbation of parents of sick children in the first place indicated – non-compliance with hypoallergenic diet – 18 (51%), infectious diseases – 7 (20%), contact with household allergens – 5 (14%), as possible causes of acute noted stress, intake of medicines.

Cutaneous manifestations of dermatitis characterized by typical morphology and localization of lesions (face, neck, trunk, flexor surfaces of the limbs). The clinical picture is dominated by symmetric erythematous-papular rash with a penchant for grouping with small-and sredneplastinchatym desquamation; foci of infiltration and lichenification, excoriation linear or point; hemorrhagic crusts. White spilled autographism detected in 58% of patients, mixed – 27%, pink – 15%.

The complex research of sick children were included traditional methods of research – clinical analyzes of blood, urine, coprogram, ultrasound of internal organs, if necessary, the patients were examined by doctors related specialties. All children were also screened for infection AIT, which was used for the diagnosis of molecular biological method for determination of herpes viruses – polymerase chain reaction (PCR). As a material used peripheral blood.

In assessing the condition of the patient is very important to identify the negative impact of chronic skin disease on the life of the patient. To determine the severity of disease in patients at the beginning and after 1 month of treatment. use child dermatological quality of life index (DDIKZH). As

the main symptom of the disease was assessed subjective itching of varying intensity with the help of the index itching (PRURINEX) (younger children PRURINEX installed by surveys of parents). The average value of the index was 3,8 points itching. Expressed itch was observed in 28% of children with persistent and prolonged course of AD.

Findings. In assessing the clinical tests have observed children attracted attention: severe anemia (31%), neutropenia (20%), lymphocytosis (27%), increased erythrocyte sedimentation rate (22%) in the aggregate, these results indicate the presence of inflammatory process with a marked reduction in immunoreactivity in children. Of comorbidity in patients with AD was dominated by children respiratory disease, occurring with an allergic component (48%), diseases of the digestive system (36%), cardiovascular system (7%), kidney (6%), nervous system (5%). Studies have revealed the examined children following forms of infection: HSV-1 in 12 (63%) patients, HSV-2 – in 5 (26%), cytomegalovirus in conjunction with HSV 1,2–2 patients (11%), in other sick children PCR revealed no infectious pathology. Thus, 19 (54%) children have been infected with HSV. In 17 (89%) patients were held definition of psychological status (children under 4 years due to the inability to identify and select the answers count data was not performed). In calculating the average value of the index DDIKZH equal – 20,3, where the minimum value of the index – 6 points, and the maximum – 30 points. Higher rates DDIKZH observed among children with prolonged and persistent course of dermatosis and severe clinical manifestations.

Study playback of various objects: House, Tree, Man (BCD) allows to assess the psychological state of sick children in chronic diseases flowing: 3 (17%) children had a feeling of alienation, of rejection, 7 (41%) – had complicated family relationships, internal stress and a lack of positive emotions in the house, 9 (53%) patients experienced anxiety and fear, difficulties in interpersonal relationships.

We found that the details of the image of Man also express the emotions of the patient level, as figures 12 (63%) patients showed children insecurity and cowardice, timidity and experiences.

Proportioned figure with respect to a piece of paper mean psychological significance, importance and value of things or relationships that are symbolically represented in Figure BCD. Very small size of the picture in 15 (77%) children reflect distrust of self and a sense of inferiority.

Symptom test BCD expressed in varying degrees, most often were marked manifestations such as insecurity (30%), anxiety (24%), conflict (32%), feelings of inferiority (22%), hostility (20%) was less than the characteristic distrust of self (12%).

Children with AD received conventional therapy (antihistamines, calcium supplements, enzymes, etc.) in patients with AIT regimen included Gipovin 10 mg/kg (valacyclovir hydrochloride) (7 days) or

by TSikloferon 0,3–0,6 g per day (10 receptions drug scheme) in the respective age dosage. 17 patients to improve the performance of the psychological status during the month was appointed Adaptol (mekibar) at a dose of 300 mg twice daily, providing neurotropic action on the causal mechanisms of psychosomatic disorders. ADAPTOL valuable qualities – as a means of correction psihosomatichskih disorders lies in the combination system (regulatory) and cellular (membrane) mechanisms of action. ADAPTOL influence on neurotransmitter in the CNS processes based on the ability to normalize impaired imbalance between excitatory and inhibitory processes of the nervous system, is a leading pathogenetic link psychosomatic diseases. The drug activates processes of energy cells, glucose metabolism and tissue respiration. Nootropic effect ADAPTOL provided its properties and antihypocytic spsobnostyu improve cerebral blood flow, which in turn improves physical and mental performance, mental alertness, improves the emotional spectrum, memory and dynamics of cognitive processes.

Integrated use of the above drugs allowed to reach the positive dynamics of clinical symptoms of AD in varying degrees of severity. Benchmark analysis DDIKZH values indicate improved quality of life compared to the original ($12,4 \pm 2,3$ points), pruritus severity ranged from moderate to itch itching weak force (2–3 points).

The above demonstrates the need for examination of children with AD at AIT, and if it is available to add to the complex therapy antiviral agents. The results of therapeutic techniques prove the effectiveness of combined treatments of complex correction psychosomatic.

References

1. Allergic diseases in children: current problems of diagnosis, therapy and rehabilitation: (Matthew Nauchn. – Pract. Conf.). Ed. prof. L.F. Kaznacheeva. – Novosibirsk, 1998. – 222 p.
2. Allergic children (clinic, treatment, organization of clinical supervision and prevention) method. Rekomendatsii / Sost.: N.I. Toropova etc. – Sverdlovsk, 1990. – 65 p.
3. Esingaraeva Z.B. Atopic dermatitis and ihtiozofornnye genodermatosis in populations of southern Kazakhstan, a new treatment for atopic dermatitis: Author. dis... Dr. med. Sciences. – M., 2002. – 32 p.
4. Morozov G.V., Antropov Y.F., Assanova L.M., Balabanov V.A. Psihodermatoallergologiya childhood: features and prospects of therapy // Pediatrics, 2007. – Vol. 86; № 2. – P. 51–58.
5. Nizamutdinova D.M. Clinical and immunological features of atopic dermatitis in sensitized children mold fungus *Phoma betae*: Author. dis... cand. honey. – Sciences, Kazan, 2002. – 16 p.
6. Nikolaev V.V. Impact of chronic disease on the psyche. – M.: Medicine, 1987. – 166 p.
7. Fedenko E.S., Stroilov I.S., Yarilo L.G., Latysheva T.V. Epidemiology of atopic dermatitis // *Materia Medica*. – 2000. – № 1 (25). – P. 19–25.
8. Bos J.D., Sillevs Smitt J. H. Atopic dermatitis. – YEADV; 1996. – Vol.7. – P. 101–114.
9. Ironside J.W. An introduction to neuropathology. – Hystopatology. – 1994. – Vol 25. – P. 590–594.
10. Leung D.Y.M. Atopic Dermatitis. An Update for the next Millennium // *J. Allergy Clin. Immunol.* – 1999. – Vol. 104. – P. 99–108.

The work is submitted to the International Scientific Conference «Modern Problems of Experimental and Clinical Medicine», Thailand, December, 20–30, 2013, came to the editorial office on 06.12.2013.