IMMUNOPATHOLOGICAL SHIFT IN CHILDREN WITH LYMPHATIC DIATHESIS IN THE ARAL REGION CONDITIONS

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Relevance. Lymphatic diathesis (LD) is a constitutional anomaly, which is manifested by lymphoproliferative processes and hypoplasia of the endocrine and cardiovascular systems. The main symptoms are lymphatism and impaired immunity, impaired water-salt metabolism, and cardiovascular failure. The high relevance of lymphatic diathesis is due to its incompletely studied nature and severe complications in the form of thymomegaly and acute adrenal insufficiency, which can lead to sudden infant death.

Purpose of the study: to study immunopathological changes in children with lymphatic diathesis in the Aral Sea region**.**

Materials and methods. We observed 40 children aged 7 to 11 years living in the Aral Sea region and suffering from lymphatic diathesis. The control group consisted of 25 practically healthy children of the same age. The clinical diagnosis was made on the basis of clinical laboratory and instrumental studies, as well as LD markers. We studied the immune status of children.

Results and its discussion. When studying the clinical markers of LD, the following were revealed: the presence of chronic foci of infection - 98.0%, pathological course of pregnancy - 92.0%, lymphoproliferative syndrome (persistent enlargement of peripheral lymph nodes) - 85.0%, endocrinopathic syndrome (hypoplasia of the thyroid gland) - 67%, body disproportion - 49.0%, sympathoadrenal syndrome (large birth weight) -68.0%, (thymomegaly at birth) -

44.0%, which is consistent with literature data**.** Comparison of the results of immunological studies showed pronounced immunopathological changes, such as a decrease in C3, C4 complement components (P<0.001), phagocytic activity of neutrophils (PhAN) (P<0.001), an increase in antigen-binding lymphocytes (ABL) of the kidneys and ABL of the lungs (P<0.001) in blood.

Conclusion. The state of cellular immunity in children with lymphatic diathesis in the Aral Sea region is characterized by pronounced immunopathological changes, which manifest themselves in the form of a decrease in C3, C4 complement components, PhAN, an increase in ABL of the kidneys and ABL of the lungs. Immunopathological changes persist during the period of clinical remission of lymphatic diathesis, requiring monitoring of the immune status and immunocorrection in the management of such patients.