



Azərbaycan Respublikası
Səhiyyə Nazirliyi



V.Y. Axundov adına Elmi-Tədqiqat
Tibbi Profilaktika İnstitutu



**Ümummilli Lider HEYDƏR ƏLİYEVİN
100 illik Yubileyinə həsr olunmuş
“TİBBİ PROFİLAKTİKANIN AKTUAL PROBLEMLƏRİ”
mövzusunda beynəlxalq elmi konfransın
MATERİALLARI**

**ABSTRACT BOOK
of international scientific conference
“ACTUAL PROBLEMS OF MEDICAL PREVENTION”
dedicated to the 100th Anniversary of
National Leader HEYDAR ALIYEV**

Bakı / Baku – 2023

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symptoms, there was a decrease in the level of molecules of average mass in the blood plasma, which amounted to 0.15 ± 0.01 IU in the first group and 0.25 ± 0.02 IU in the second group. During the period of early convalescence, there was a dynamic decrease in SMPs in patients in group 1, which later reached normal values, while in patients in group 2, these indicators remained elevated and amounted to 0.17 ± 0.01 FU.

Thus, the study of MPM indicators in the examined patients with salmonella infection with various outcomes of the disease showed that the melon marker of inflammation in the blood plasma indicates the level of endotoxemia and depends on the severity of the pathological process, and can also be used to assess the degree of recovery from this infection.

PCR DIAGNOSTICS OF PATIENTS WITH DIARRHEA SYNDROME

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The purpose of the study. A comparative assessment of the results of PCR diagnostics of acute intestinal infection (AII) in children and adults.

Material and methods. The study was conducted on the basis of the clinic RSSPMCEMIPD, in the period 2018-2019. A total of 107 inpatients with a diagnosis of "Acute diarrhea" were examined. The patients were divided into 2 groups: first group consisted of 49 children aged 7 to 18 years, second group included 51 adult patients aged 19 to 70 years. To identify AII pathogens, fresh fecal samples were taken on the day of admission and further PCR analysis was carried out using the PCR analyzer

Rotor Gene Q - SNR0911/54, manufactured in Germany, and kits from Inter Lab Service "AmpliSens® OKI screen-FL" were used.

Results and conclusion. Of all the examined patients with mono-infection, there were 16 patients ($14,95 \pm 0,37$) among adults and 15 ($14,02 \pm 0,36$) among children. Mixed infection was registered 1,4 times more often in the group of adult patients compared to the group of children and amounted to 26 ($37,39 \pm 0,43$) and 19 ($28,03 \pm 0,8$), respectively. Simultaneous detection of 2 pathogens in the group of adults was recorded in 21 ($19,63 \pm 0,43$) cases, while in the group of children, mixed infection of 2 pathogens was detected in 17 ($15,89 \pm 0,39$) patients. At the same time, viral-viral diarrhea was recorded 2,5 times more often in the group of children. With regard to bacterial-bacterial and viral-bacterial associations, the results were greater in the group of adult patients and the ratio of the groups was 5x2 and 14x10, respectively. Associations of the three pathogens were identified in 15 ($14,02 \pm 0,36$) adult patients and in 12 ($11,21 \pm 0,32$) children. There were also associations of 4 pathogens, which were recorded significantly more often in the group of adult patients compared with children and amounted to 4 ($3,74 \pm 0,19$) and 1 ($0,93 \pm 0,09$) cases, respectively.

The study showed that acute intestinal infection caused by a mono-pathogen is recorded with approximately the same frequency in patients in the adult and pediatric age groups, while the detection of mixed infection is observed 1,4 times more often in adult patients compared to children.