

COMPARATIVE CHARACTERISTIC OF SENSIBILIZATION OF CHILDREN WITH BRONCHIAL ASTHMA, RESIDENTS OF UKRAINE AND INDIA

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Introduction: In different parts of the world, from 1% to 20% of children suffer from bronchial asthma, in India - 4% to 19%, and in Ukraine - 4.5% - 17.6% of children suffer from this disease. Purpose: Comparison of hypersensitivity of children with bronchial asthma, residents of Ukraine and India. Materials and methods: In Children's Hospital N5 in Zaporizhzhia, 87 children with bronchial asthma had to prick tests with allergens, the results of which were compared with the results of sensitization of children of India for literature data. Results: In Ukraine, hypersensitivity to pollen allergens registered in 88% of cases, and in children of India is almost 2 times less (in 45%). Children sensitized to allergens of tree pollen in Ukraine only in 11.11% of cases, while in India - in 20% (almost 2 times more often). Sensitization of home dust mites among children in Ukraine - was also noted more often than among children in India (*Dermatofagoides pteronissinus* - 87.07% vs. 35% and *Dermatofagoides farina* - 63.79%, vs. 40%, respectively). Hypersensitivity to fungal allergens in Ukraine characterized by such data: *Alternaria alternate* (40,94%), *Aspergillus* (86,44%) and in India - *Alternaria alternate* (9%), *Aspergillus* (5%). Sensitization to the cat's epidermis in Ukraine's children registered in 17.34% against 14% in India. Conclusions: The analysis of hypersensitivity in children with bronchial asthma showed that the sensitization of children depends on the place of their residence. Thus, in Ukraine, children more often than in India had sensitization to grass pollen and fungal allergens, less often to pollen of trees.

NEUROPSYCHIATRIC AND BEHAVIOURAL PROBLEMS IN CHILDREN WITH ALLERGIC DISEASES

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Introduction: Pediatric allergic diseases are particularly important for society due to their chronic course and high healthcare costs. Internalizing behavioural and emotional problems are associated with allergic diseases due to the effect of the limbic system in the brain. Aim: To study the neuropsychiatric and behavioral problems in children with allergic diseases. Methods and materials: We have evaluated 25 children suffering from allergic diseases of age group 11.9 ± 4.01 years with EAQ30 Psycho- emotional questionnaire in which 12 girls and 13 boys participated at the Pediatric Child Hospital N5, Zaporizhzhia. Results: We analysed the results and categorized the children basing on their answers into 6 scales of emotions. We found out that out of total children $M \pm m$ (2.23 ± 0.1), boys $M \pm m$ (2.23 ± 0.1), girls $M \pm m$ (2.3 ± 0.1) showed differentiating emotions, verbal sharing of emotions were $M \pm m$ (2.2 ± 0.1), boys $M \pm m$ (2.2 ± 0.5), girls $M \pm m$ (2.2 ± 0.1). Children who do not hide their emotions are $M \pm m$ (1.99 ± 0.0), boys $M \pm m$ (1.99 ± 0.0), girls $M \pm m$ (1.99 ± 0.00). Bodily awareness of emotions was seen in total $M \pm m$ (2.00 ± 0.03), boys $M \pm m$ (2.0 ± 0.03), girls $M \pm m$ (1.99 ± 0.03). Total children $M \pm m$ (2.2 ± 0.04), boys $M \pm m$ (2.2 ± 0.03), girls $M \pm m$ (2.18 ± 0.04) attended to others emotions and feelings. Children who could analyse their self emotions were $M \pm m$ (2.37 ± 0.1), boys $M \pm m$ (2.37 ± 0.1) and girls were $M \pm m$ (2.36 ± 0.1). Conclusions: From the above study and through thorough review of the literature we can conclude that the impact of stress on the development and expression of allergic diseases may also reflect dysregulation of neurobiological components of the stress response system and also alterations of the hypothalamic-pituitary-adrenal axis and sympathetic and adrenomedullary systems. Dysregulation of normal homeostatic neural, endocrine and immunologic mechanisms can occur in the face of chronic stress, leading to chronic hyperarousal or hyporesponsiveness have been reported in children with allergic diseases.