



Abstract Book

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574 COEXISTENCE OF CHEST TUBERCULOSIS AND CLOSTRIDIUM DIFFICILE INFECTIONS IN CHILDREN AND ITEMS OF ITS CONTROL.

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TITLE: COEXISTENCE OF CHEST TUBERCULOSIS AND CLOSTRIDIUM DIFFICILE INFECTIONS IN CHILDREN AND ITEMS OF ITS CONTROL.

INTRODUCTION: Our study describes the attempt to overcome the development of resistance of Mycobacterium tuberculosis in connection with the termination of its treatment of complications of therapy in the form of intestinal infection Clostridium difficile. The modern theory of probiotics has enabled us to offer the treatment of side effects of treatment on the part of the intestine in patients with children. Objectives We have studied the incidence of Clostridium difficile infection in children who are taking anti-TB drugs. Also we studied the effectiveness of the treatment of Clostridium difficile intestinal infections in children with antibiotics while using probiotic strains Lactobacillus acidophilus Rosell-0052 and Lactobacillus rhamnosus Rosell-0011, Institute of Canada. Prove the absence of the effect of probiotic strains on Rosell delayed treatment-resistant pulmonary tuberculosis.

METHODS: At 55 adolescents in aged 13-18 years old with pulmonary tuberculosis were isolated mycobacteria are sensitive and resistant to anti-TB drugs. These patients were treated with anti-TB drugs for more than 6 months.

RESULTS: As a side effect of this therapy in 21 teenage (58.3%) was developed Clostridium difficile diarrhea. Effective therapy aimed at the disappearance of Clostridium difficile intestinal infection appeared assignment for children with chest-TB probiotic strains in a dose of 1.2×10^{10} cfu per day for 1 month on a background of anti-TB drugs.

CONCLUSION: 1. Positive test for the content of Clostridium difficile toxin in the stool of children with pulmonary tuberculosis on the background of antibiotics was 58.3% of patients. 2. Using of probiotic strains Rosell, Canada at a dose of 1.2×10^{10} daily for 1 month at the same time taking anti-TB drugs significantly reduced clinically significant level of Clostridium difficile toxins in the stool below 1 ng/ml. 3. Using only we studied strains Rosell probiotic strains may be offered in addition to the treatment of tuberculosis, which stops the development of adverse reactions during this treatment and will help to overcome the resistance of Mycobacterium tuberculosis antibiotics.